



UNIVERSITY OF
KWAZULU-NATAL

**THE STATE OF PSYCHOLOGICAL SERVICES IN
SECONDARY SCHOOLS: EXPERIENCES OF PRINCIPALS,
SCHOOL COUNSELLORS, EDUCATORS AND LEARNERS**

by

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**THE STATE OF PSYCHOLOGICAL SERVICES IN SECONDARY
SCHOOLS: EXPERIENCES OF PRINCIPALS, SCHOOL COUNSELLORS,
EDUCATORS AND LEARNERS**



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DEDICATION

I dedicate this to my late father, Tshililo Murigwathoho, and my late grandmothers, Vho-Nyamukamadi Murigwathoho and Vho-Phophi Magadagela, my family, and all high school learners and their educators. May this be an inspiration to all those with seemingly insurmountable problems and challenges to stay positive as nothing is impossible in life.

To acquire knowledge one must study and to acquire wisdom one must observe (Anon).

DECLARATION

I hereby declare that the work on “*The state of psychological services in secondary schools: experiences of principals, school counsellors, educators and learners*” is my own work – both in conception and execution – and, it has not been submitted for any degree or examination in any university, and that all the sources I have used or quoted have been adequately indicated and acknowledged by means of complete references.

H.N. Muribwathoho

____/____/____
Date

ABSTRACT

South African education has undergone major restructuring since 1994 with the aim of improving the lives of the learners, their parents and educators. The restructuring and re-orientation has fortuitously caused casualties along the way. One such casualty was the redeployment of guidance counsellors and the consequent marginalisation of school Psychological Services such as Guidance and Counselling Programme Services. Therefore, the purpose of this study was to investigate participants' experiences of Psychological Services in selected secondary schools of KwaZulu-Natal province and implications thereof and to make inferences on the state of School Psychological Services in schools. The final outcome of the study is, apart from identifying challenges, the formulation of a framework or strategy to address the implementation of psychological services in secondary schools. Through a multi-site mixed methods research study involving 17 high schools, this study utilised triangulation of a questionnaire and interview as data collection methods on three sources of data, namely, school counsellors, learners and school principals.

This study also involves critically examining the Life Orientation curriculum *vis-à-vis* its effectiveness in addressing the educational, career, psychological, social and overall developmental needs of learners. It is guided by one primary research question which is:

- What are participants' (learners, school counsellors, and principals) experiences of School Psychological Services provisioning in selected secondary schools in Kwazulu-Natal?

Underlying this question are the following sub-questions:

- (1) What are participants' (viz., learners, school counsellors, and principals) understandings of Psychological Services and their impact on learners' well-being and academic performance?
- (2) What are learners' needs for School Psychological Services as identified by participants (viz., learners, school counsellors and principals)?
- (3) What is the current status of Psychological Services (including the various forms of School Psychological Services and resources) in the selected secondary schools?
- (4) What are the challenges or obstacles to the effective implementation of Psychological Services in the selected schools?

Deriving from the interpretive paradigm and informed by two theoretical frameworks, namely ecosystemic theory and social constructivism, the study revealed that there is a dire need for Psychological Services in schools, namely guidance and counselling (including one-on-one counselling), personal guidance, career guidance and career counselling all of which are meant to empower youth to address issues and challenges affecting them and their future prospects. Life Orientation, which is a relatively new addition to the school curricula, is the available form of Psychological Services since it is a learning area prescribed by the Department of Education. The introduction of Life Orientation as a compulsory learning area (i.e. school subject) was meant to accomplish its re-orientation as a substitute for school guidance and counselling. However, services which are meant to promote the holistic development of youth by focusing on and enhancing their social, intellectual, academic and affective aspects are inadequate, especially

because, as revealed by the findings of the study, learners' emotional problems are better addressed in a one-on-one personal relationship and not in a directive teaching-learning process. Impacting on the delivery of School Psychological Services is the scarcity of personnel resources as there are no school counsellors to provide for the emotional needs of the learners. Life Orientation teachers are not suitably or adequately trained to counsel learners and design intervention strategies as the services they provide are limited to their job roles. The introduction of Life Orientation, though noble, is not enough to assist young people to face their challenges head on.

Using the interpretivist paradigm, which is informed by multiple participants' meanings of the fundamental nature of the social world, I was able to interrogate the state of psychological services in schools and understand participants' experiences of the services, learners' needs and the challenges they experienced. Social constructivism relates to the importance of psychological services in the promotion of learners' well-being, and how they need informed adults (i.e. psychologists, counsellors or educators) as mediators between the context, beliefs, feelings and behaviour.

The ecosystemic perspective on child development advocates for the availability of such psychological services to address the needs of adolescents, who – in the process of physical and emotional development – encounter challenges that often overwhelm their ability to cope and, consequently, affect their academic performance. The school as a microcosm of society should have tools at its disposal to deal with learners' psycho-social problems. The study recommends that the Department of Education heeds the call for programmes that will focus on both the academic and emotional needs that tend to characterise adolescence. Academic achievement cannot continue to be viewed as being more important than, and, unrelated to the promotion of personal and psychological development of learners. Although Life Orientation contributes to the support of learners, including those with problems, the need for the revival or introduction of School Psychological Services (SPS), within the ambit of Psychological, Guidance and Special Education Services (PGSES) and Inclusive Education (IE) is highly recommended, with the provision of individual and group counselling services as its main priority.

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ABBREVIATIONS & ACRONYMS

CAPS	Curriculum and Assessment Policy Statement
DET	Department of Education and Training
DOE	Department of Education (DBE & DHE)
ECD	Early Childhood Development
ELSEN	Education for Learners with Special Education Needs
ESS	Education Support Services
FET	Further Education and Training
GET	General Education and Training
HSRC	Human Science Research Council
IE	Inclusive Education
LO	Life Orientation
LOP	Life Orientation Programme
NCESS	National Committee on Education and Support Services
NCS	National Curriculum Statement
NCSET	National Commission on Special Needs Education and Training
NEPI	National Education Policy Investigation
PGSES	Psychological, Guidance and Special Education Services
PWB	Psychological Well-Being
RNCS	Revised National Curriculum Statement
SMT	School Management Team
SPS	School Psychological Services

CHAPTER ONE

ORIENTATION AND BACKGROUND

“Positive psychological support sets the stage for better learning” [Snyder & Lopez, 2005, p. 761]

1.1 Introduction

South Africa, through its constitution, has declared that the provision of quality education to all its citizens is a human rights issue. Quality education involves learners who are healthy, well-nourished and ready to participate and learn; environments that are safe, protective and that provide adequate resources; content that is reflected in relevant curricula and materials for the acquisition of basic skills, including life skills and relevant knowledge and values (Colby, Witt & Associates, 2000). It involves the use of appropriate teaching and learning approaches, resources and the availability of appropriately trained teachers in the classroom. This will facilitate learning, reduce disparities, and improve learning outcomes that encompasses knowledge, skills and attitudes linked to national goals for education and positive participation in society (Colby, Witt & Associates, 2000). Nelson Mandela (1994, p. 194) described quality education as “the great engine of personal development through which the daughter of a peasant can become a doctor, the son of a mine worker can become the head of the mine, a child of farm workers can become the president of a great nation”. It is the education through which children gain knowledge and skills to survive, to learn, to live dignified lives and to contribute to the development of their communities and nation (UNICEF, 1993). From a psychological point of view, quality education is education that – apart from equipping learners with knowledge and skills to help them chart their future destinies – attempts to assist those experiencing problems.

A psychologically healthy individual is an individual with the capacity to interact with other people and with their environment in ways that promote a sense of well-being, as well as enhance their personal development and allow them to achieve their life goals (Victoria Department of Health, 2003). This means that in addition to making it possible for learners to excel academically, such education addresses their social, psychological and emotional challenges in order to enhance their general well-being.

Informed by this understanding, this thesis argues that an improvement in basic education outcomes is a prerequisite for achieving the country's long-range development goals and consequently pushing back the frontiers of poverty. According to the Department of Education (2003a), the South African schooling system was for decades used as a brutal instrument of oppression against the intellect and aspirations of the majority of country's youth. The Soweto students' uprisings of 1976¹ marked a new era in youth involvement in the national democratic struggle for liberation and undoubtedly transformed the course of South Africa's history. According to Chuenyane (1990), since June 16, 1976, there has been an unprecedented growth in awareness on the part of black secondary school students about the socio-economic problems and political inequalities in South Africa. From that period until the onset of democracy in 1994, it had become clear that for education to become and remain relevant and liberating, it had to change with changing times. As Lethoko, Heystek and Maree (2001, p. 311) aptly state, "one of the crucial changes and challenges that the post-apartheid South African democracy faces is to reconstruct, against many odds, a society and an education system that will create excellent conditions for teaching and learning".

¹ On this day 16 June 1976 about 20 000 youth in Soweto (South-West Townships) went on a protest march against the use of Afrikaans as a medium of instruction and met the brutality of the security forces with teargas and live ammunition which resulted in many injuries and fatalities (Randby & Johannesson, 2013, p. 229).

However, the post-apartheid education reform agenda has been faced with a myriad of challenges. On the one hand, the conception of education promoted in most South African schools and endorsed by parents is too narrowly conceived as involving purely academic instruction (Sharratt, 1995). This means that South African education is characterised by a blinding obsession with results (i.e. good grades) at the expense of learners' emotional or psychological well-being. On the other hand, as Engelbrecht (2005, p. 22) points out, "South African learners are faced with personal and environmental stressors that put them at risk for emotional, behavioural and academic difficulties". The common risks include, among others, violence, teenage pregnancy, drug or substance abuse, and HIV and AIDS which have negatively impacted on young people's development and education. This necessitates the provision of psychological services for learners and teachers for the educational, emotional, physical and social problems they experience in and around schools, and to ultimately promote their wellbeing and mental health. Adding to this paradox is the fact that the post-apartheid educational reforms led to the withdrawal of psychologists and professional counsellors from schools. The now defunct apartheid policy created disparities and discrimination in all aspects of society and had a profound impact on the nature and provision of education in general, and of guidance and counselling services in particular. During the apartheid period, guidance in Whites-only schools concentrated on teaching learners patriotism and how to conform to the needs of the country, whereas Black² learners (in Blacks-only schools) were taught how best to serve their masters in the workplace, with no career guidance (Nicholas & Cooper, 1990; Rooth, 2005; Stead & Watson, 2006). As Stead and Watson (2006, p. 5) put it, "the education of the white child prepares him for life in a dominant society and the education of the black child for a subordinate

² Although I realize that classification by ethnic group is an artificial way of distinguishing people, I nevertheless deem it necessary to point out meaningful implications of inequalities and differences along these lines.

society”. This unequal provision of school guidance and counselling resources and the distribution of other resources along racial lines, coupled with a curriculum designed to retard the intellectual development of Blacks (Africans) has had a lasting impact in township and rural schools.

The focus of the study therefore is three-fold: First the study investigates participants’ (learners, educators, school counsellors & principals) perspectives on the state of psychological services in schools and the challenges individual schools grapple with in the provision of such services. Secondly, it focuses on participants’ experiences of the need for, and availability of School Psychological Services and their impact on learners’ well-being and academic performance. Thirdly, it examines the need for psychosocial support in the school, and in particular, the provision of School Psychological Services to adolescent learners.

1.2 Focus and purpose of study

Given the complexities of life in the 21st century, it appears that adolescents experience many challenges at school which require some support which could ideally be provided by an efficient Psychological Services programme. These challenges include depression and psychological trauma, violence, abuse and bullying, substance abuse, career decision-making, to mention but a few. Ellerbrock and Kiefer (2013) maintain that school environments should be strategically structured to help support adolescents’ developmental needs as they make the transition to adulthood. The correlation between learners’ mental or emotional wellbeing and their scholastic performance has gradually become a subject of tedious debates (i.e. rhetoric), though the issue is

not taken seriously. While teachers voluntarily offer their services to learners dealing with some of these issues, it becomes a burden as they have a teaching load and are not trained to design intervention programmes. Therefore, this study focuses on how public schools address psycho-social issues and seeks to investigate participants' perspectives on the need for and availability of School Psychological Services, their impact on learners' psychological well-being (PWB) and academic performance as well as the challenges schools grapple with in the provision of psychological services.

The study aims to understand – from the participants' perspectives – the strategies and resources their schools use to tackle such psycho-social issues (poverty, unemployment, diseases, substance abuse & crime) and their impact on learning and the role School Psychological Services could play in promoting learners' well-being. Challenges around implementation of psychological services will be both general and unique to different settings and my interest lies in the generation of ideas on how to either implement or improve the services. Such information will be useful in designing and laying down the foundation for the implementation of an effective Psychological Services programme in all schools, especially township schools.

1.3 Rationale for the study

The motivation for embarking on this study was both professional and personal, in that I am both a qualified teacher and a teacher educator with a passion and keenness to improve the conditions under which learning occurs in schools. When learners seem unhappy, I will be the first one to find out what happened, and if anything, I am very likely to step in and try to make a difference.

Furthermore, as a registered Educational Psychologist who is actively involved in helping learners with issues by designing intervention programmes, I am curious to know how schools provide emotional support to learners in dealing with issues which impact on their studies and lives outside the classroom context, and how they cope without psychological or emotional support. The one issue that jolted me into action happened during teaching practice in a school where I had gone to assess a student: a grade 11 learner wanted to see a student teacher who unfortunately was rushing to a staff meeting on a Friday afternoon. The student teacher told the learner that he would see her on Monday and sadly and regrettably the learner committed suicide over the weekend. Apparently she was depressed and needed to talk to someone but details of her argument with her live-in boyfriend emerged thereafter. A trained school counsellor or psychologist might have sensed the gravity of the situation and done something, even if it meant missing the staff meeting. Incidents such as this evokes my desire to – with a critical eye – investigate the role of School Psychological Services (namely Guidance and Counselling and other psycho-educational services), in the promotion of learners' well-being and capacity to handle serious emotional issues such as the break-up of a relationship without attempting suicide.

I am interested in understanding the problems and issues learners experience; the support services they would need and the extent to which they are available. For example, *Could the student teacher have prevented the learner's suicide? Maybe, nobody knows.* Thus, in this study, participants' perspectives on the availability of Psychological Services and their impact on learners' psychological well-being and academic performance were investigated. In particular, the study addresses the following questions: Are the services provided in schools? Are learners' needs being effectively met? Are services successfully effecting attitudinal and behavioural

changes required of young people to have a better and brighter future? As Makinde (1988, pp. 43-44) notes: “...the measurement of Guidance outcomes is very important to gather information on whether or not students are being well prepared for life in school and outside the school, and for entry into higher-education institutions”.

Thus, the findings from this study might have implications for policy-makers, teachers and School Governing bodies towards the design and implementation of programmes that would potentially address adolescent learners’ needs in secondary schools.

1.4 The state of School Psychological Services (SPS): An overview of the issues

The study is based on the assumption that most of the psycho-social issues affecting learners and impacting on learning can be dispensed of by school-based psychological services programme. As Gilligan (1998, p. 15) points out, “schools have an important social inoculation role in strengthening the capacity of children to cope effectively with adversity and also resist the temptation or impact of negative experiences or risk-taking behaviour”. This section provides a preliminary survey of the state of psychological services in schools and issues that impact on teaching and learning which make the provision of SPS a necessity for learners and teachers (a detailed analysis is provided in the literature review chapter).

1.4.1 Educational reforms and their impact on School Psychological Services

The Soweto students’ uprisings of 1976 marked a new era in youth involvement in the national democratic struggle for liberation. This was the period that undoubtedly transformed the course

of South Africa's history and consequently the so-called class of 1976 occupy a special place in our country's history. The period ushered in a new era wherein youth became more conscientized (aware) of the socio-political issues affecting their lives. According to Chuenyane (1990), since June 16, 1976, there has been an unprecedented growth in awareness on the part of black secondary school students of the socio-economic problems and political inequalities in South Africa. As a social force, youth launched a relentless resistance which ultimately led to the demise of apartheid, and as consequence thereof, the fragmented education system was brought under one ministry (Dlamini, 1998). Mda (2001) calls the period between 1976 and 1994 as the 'era of educational reform'. In April 1991 the South African government committed itself, for the first time, to a single education system which was not based on race and would serve the whole country and ensure quality education (Cooper, Hamilton, Mashabela, Mackay, Sidiropolous, Gordon-Brown, Moonsamy, 1992). The transformation of the existing education system became a reality after the 1994 democratic elections, consequently, nine provincial departments had to, for the first time, function as a single national system of education (Manganyi, 2001). Hence, to challenge the practice of segregation and promote equity in the post-apartheid era the White Paper on Education and Training of 1995 (1995b, p. 73) stated that "all historical inequalities should be redressed and that education policy should enable all individuals to value, have access to and succeed in lifelong education and training of good quality". Ironically, it was during the reforms of 1980s that the government authorised the rationalisation and redeployment of guidance and counselling services together with professional school counsellors (Maree & Ebersöhn, 2002).

Consequently, youth in the 80's and 90's were engaged in a different struggle as they wrestle with unique challenges different from their 70's counterparts. For starters, years of oppression had taught black children to be inferior to whites to an extent that they stopped believing in themselves, and as Dlamini (1998, p. 19) put it, "there is more that education in South Africa has to offer to the Black child". Liberation and social justice will be fulfilled if education is responsible for redressing injustices and psychological harm caused by colonization, racial oppression and white superiority. It is very little consolation that racial integration of children in schools did very little to dilute ingrained racist tendencies with serious psychological repercussions (Mda, 2000). According to Petersen, Swartz and Bhana (2010), apartheid policies of segregation left a legacy of impoverished black communities in rural areas and 'townships' in economically marginalised locations with poor service delivery, where substance abuse, high risk sexual behaviour and violent crime are major behavioural problems among the youth. On the recent Youth Day celebrations, the Deputy President of South Africa, Cyril Ramaphosa, indicated that one of the toughest challenges facing today's youth is drug abuse (News24.com), with drugs such as '*nyaope*' and '*whoonga*' ravaging township youth.

Whereas there are policy frameworks and guidelines to deal with the psycho-social issues such as poverty, school violence and bullying, rape, substance abuse, domestic violence and teenage pregnancy as part of the lifeskills programme, there is nothing specifically focusing on how to help youth, individually, to cope with most of these issues. According to Petersen *et al.*, (2010), the Life Skills and HIV/AIDS programme was introduced nationwide in 1998 and fully implemented in 2005 in secondary schools, but the quality of the programmes have been questioned. Since its implementation, inadequate training and experience among educators

continue to be a key issue (Thaver & Leao, 2010). Although the programme increased knowledge and attitudes, it had little success in actual behaviour change (Mannah, 2002). Still, better-resourced schools experienced the most benefits. School Psychological Services, including guidance and counselling, could address the anomaly by making the school a supportive environment. Evidently there have been few developments in the provision of psychological services since the introduction of Life Orientation and, later, CAPS, but very little in terms of learner support and the provision of one-to-one counselling services. For example, it is one thing to facilitate a life skill lesson (or life skills intervention) on relationships and sex and another to assist a learner who has just ‘broken up’ (terminated a relationship) with her boyfriend and is consequently emotionally devastated. In this case School Psychological Services – using counselling and psychotherapy services – can help mend a ‘broken’ heart and simultaneously address a potential barrier to learning.

1.4.2 Adolescents’ developmental challenges

Young people today face numerous challenges such as the social effects of the HIV pandemic, pressures of drug and alcohol abuse, the results of early sexual activity and worrying levels of teenage pregnancy, and the many challenges of continuing education in situations of poverty. According to Lam and Hui (2010, p. 219) “a growing number of secondary school students across the world show signs of struggles with developmental challenges as indicated by occurrences of campus violence, suicide, behavioural problems, emotional hardships and teen issues such self-esteem, peer relations and conflicts, sexuality, family problems, drugs and gangs”. The list of serious problems facing our youths, such as divorce, sexual abuse, substance abuse, AIDS, suicide, and illiteracy seems to grow with each passing day (Gutkin & Conoley,

1990). Similarly, emphasizing the need for school counsellors, Pillay (2011) asserts that South Africa has a high prevalence of social problems that are often carried over to schools by learners from diverse backgrounds.

As a developing or ‘third-world’ country, South Africa is plagued by harsh socio-economic conditions such as unemployment, poverty, family dislocation and dysfunction, divorce, violence, crime, drugs, and diseases (such as HIV & AIDS and TB) which continue to pose very serious threats to the democracy and its education system. According to Crespi and Hughes (2004), adolescents are in crisis in school, home and the community. Within this context, today’s youth have many daunting challenges confronting them and significantly impacting on their development – making their journey a thorny one indeed. The technological advances such as the internet – though a boon – pose unique challenges to the youth, for example, cyber-bullying and propagation of propaganda. Undoubtedly, these challenges affect adolescents’ adjustment to life and it is at this crucial stage in their lives where interventions, in the form of Psychological Services, both at the community, school and family levels can have a great impact. This means that “healthy emotional and social development – including a sense of self-worth – is critical to the success of children within and outside the classroom” (Texas Guide to School Health Programs, 2007, p. 271).

Good mental health is critical to children’s success in school and life and similarly students who receive socio-emotional and mental health support achieve better academically (National Association of School Psychologists, 2006). Mental health is about how children feel emotionally and how they cope with the daily demands of life and affects their social and

physical health (Glover, 2007). Dawson and Singh-Dhesi (2010) stress the importance of the recognition that children and young people's mental health and emotional well-being is central and underpins all the work around improving the achievement and outcomes for children and young people thus: "separating the emotional from learning is like trying to conjure a water molecule without oxygen as a component. In short, if we want to teach facts effectively, we need to work with the emotional – we cannot have one without the other" (Dawson & Singh-Dhesi, 2010, p. 296). Hence, school psychologists and counsellors are increasingly viewed as key resources to promote adolescent learners' well-being. This based on the fact that a relatively high percentage of youth in schools experience mental health problems (Perfect & Morris, 2011). Unfortunately, as consequence of the rationalisation and redeployment of the late 1980's, guidance and counselling services together with professional school counsellors became obsolete (Maree & Ebersöhn, 2002).

1.4.3 Implications of children's experiences of violence and abuse

Given South Africa's high rates of child physical and sexual abuse, criminal victimisation of children and school-based violence, many young South Africans are exposed to different types of trauma (including PTSD) across multiple settings to an extent that traumatising is more of a 'condition' than an 'event' (Kaminer & Eagle, 2010, p. 229). Experiences of trauma can interfere with children's negotiation of critical developmental transitions, as well as prevent the mastery of key developmental competencies, with serious implications for their academic performance. In the same vein, Kaminer and Eagle (2010) posit that children who grow up in situations of prolonged domestic abuse are particularly vulnerable to developing long-term psychological difficulties. This means that too many children in South Africa are living in conditions of chronic

trauma, with little access to ameliorative interventions. Some of these children are highly traumatised by domestic violence, abuse, divorce, bullying and abusive relationships and are sensibly in need of a great deal of psychological and emotional (i.e. psychosocial) support. For example, the emotional effects of rape include depression, suicide, fear, anxiety, anger and shame (Ronken & Johnson, 2012) and the victims need to rebuild feelings of safety, trust, control, self-worth, all things which are often lost through experiencing or witnessing an assault. They need to seek professional help as well as social support, which according to Frydenburg and Lewis (2004), is the cornerstone of the coping process.

This presupposes the need for ameliorative mental health promotion initiatives, the calibre of school psychological services, and designed by a school counsellor, psychologist and/or social worker, to provide for the psycho-social or emotional needs of learners and build a healthy, happy and stable future population. However, there is lack of psychosocial support for traumatised learners in schools, precisely because there are no counsellors or psychologists in most schools. Currently, trauma and counselling services are not offered in South African schools. Through counselling, modelling and other behaviour modification strategies, schools can deny violence a permanent place in education. According to Burton and Leoschut (2013) the association between violence at schools and violence experienced or witnessed in the home or community lends credence to the need for a whole-school approach that is embedded in a socio-ecological model of violence prevention. Schools should provide counselling, educational and other support services to victims and perpetrators of school violence.

1.4.4 Troubled youth: incidents of depression and suicide

The high prevalent rate of abuse in South African communities makes it imperative that ameliorative interventions and services such as one-to-one counselling are offered in schools. According to Africa News Service (June, 2000), “every generation defines itself and its role in history with reference to the needs and purposes of a given society”. This thesis argues that the youth are not making sufficient strides to emulate the gains made by their counterparts of 1976 and that they are not responding well to today’s challenges. They are confronted by issues which affect their psychological well-being, and are expected to handle them on their own, with very little support from their ‘ill-equipped’ teachers. According to Statistics South Africa (2009), young people of today have been found to be involved in crime, drugs and violent activities which have been of great concern to people generally. The situation is best described by Dunbar-Krige, Pillay and Henning (2010, p. 57) thus: “...there are so many ‘troubled’ schools in south Africa that try to operate in extremely troubled communities, becoming part of the troubled community’s ecology, and if neither the school and the community can resist the onslaught of disabling social forces, both will succumb to them”. Unfortunately, too many children and youth with mental health problems are not getting the help they need and, when left unmet, mental health problems are linked to costly negative outcomes such as academic and behavioural problems, dropping out, and delinquency (National Association of School Psychologists, 2006). Flisher, Dawes, Kafaar, Lund, Sorsdahl, Myers, Thom and Seedat (2012) posit that mental health services are inaccessible and underdeveloped and, in the face of the considerable need for services, one wonders where learners with mental health problems receive help.

Undoubtedly the introduction of psychological services in schools will assist in promoting the psychological well-being of learners and educators alike. As Mashile (2000, p. 105) corroborates, schools house diverse individuals with different intellectual, personal and social needs which educators are not in a position to address consequently, support services for schools are imperative. Crespi and Hughes (2004) contend that there are a large number of children who have emotional and behavioural problems who are not receiving adequate, comprehensive services in the mental health system. According to Frydenberg and Lewis (2004), inadequate responses to coping with stress in children contribute to a range of psychosocial problems, including poor academic performance, conduct problems, anxiety, depression, suicide, eating disorders and violence. This is corroborated by Perfect and Morris (2011), who estimate that about 20% of all youth experience significant mental health issues, which presupposes the need for psychological services in schools. In February this year (2014) a 9 year old boy committed suicide by hanging himself after his uncle stopped him from watching his favourite TV programme, and in May a 12 year old grade 7 boy hanged himself after being stripped of his prefect badge (iol.co.za, 2014). The two cases involved two young boys with a promising future. In extreme cases, students have committed suicide as a result of bullying or have killed a bully (Batche & Knoff, 1994).

Suicide is, and continues to be, a serious threat to young people's mental health. According to Page, Saumweber, Hall, Crookston and West (2013), suicide ideation is prevalent globally and represents a concern for schools mental health professionals regardless of country or region. Although there are no epidemiological data on the prevalence of psychiatric disorders in adolescents in South Africa, estimates suggest that approximately 17% of youth between the

ages 6-16 years have poor mental health, with high rates of anxiety disorders, post-traumatic stress disorders (PTSD), depression and conduct disorders (Departments of Health & Basic Education, 2012). The South African Depression and Anxiety Group (SADAG, 2014) maintains that about 5% of teenagers commit suicide every month, making suicide “an all-too-common cause of death in adolescents” (Findling, 2013, p. 1). This shows how serious the matter is and how schools battle to save young lives with very little success. Overwhelmed by the issues and without adequate coping resources young people tend to become desperate and less optimistic. According to Perfect and Morris (2011) epidemiological studies have suggested that depression, which is the main cause of suicidal ideation, occurs in up to 4.6% of children and up to 8.3% of adolescents. However there are many predisposing factors that contribute to exacerbating the issue, such as family discord, souring relationships, academic failures, stress, violence and abuse. Psychological services would help identify learners at risk for suicidal behaviour and design intervention programmes. As Page *et al.*, (2013, p. 548) suggest “a universal goal is that all students in school should receive interventions designed to reduce suicidal behaviours”. This means that whatever its prevalence amongst adolescents, teachers and counsellors should, as ‘front-line’ workers, be aware of the problem and be equipped to deal with it (Best, 2006).

However, this study is not insinuating or suggesting that young people are committing suicide because there are no psychological services in schools but is advocating for the provision of such services (specifically, therapeutic interventions) to minimise incidents of teen suicide. Suicide-prone teens have pent up feelings which need an outlet, and School Psychological Services can facilitate that. Formal education has for ages undermined or failed to acknowledge the impact of learners’ mental health difficulties on their general wellbeing and scholastic performance. Hence

Schlebusch (2005a, p. 191) argues that “the fact that there are no counsellors in many schools should be addressed, as this has a negative impact on the mental health of learners at risk of suicidal behaviour, and who could utilise school counselling services”. School counsellors played an important role in learners’ lives and when they fell away there was a noticeable decline in learners’ behaviour and their attitudes to studies and life. Ironically, the best treatment option for suicide is psychotherapy, which includes therapeutic listening (cognitive) and psycho-educational counselling skills (Schlebusch, 2005b).

1.4.5 School violence and bullying

Public opinion maintains that school violence in South Africa is escalating at an alarming rate and that something needs to be done. Despite the existence of policies and a learner code of conduct in most schools, violence, physical and sexual abuse and gang activities are a serious cause for concern. According to Burton (2008), schools are generally seen as mechanisms to develop and reinforce positive citizens and sites where individuals are prepared for the role they are to play in society, but studies and media reports suggest that despite popular discourse, schools are sites of violence. This can either be learner-on-learner violence, bullying, domestic violence, or a learner shooting at an educator or vice versa. According to Petersen, Swartz, Bhana and Flisher (2010), adolescents living in impoverished areas are vulnerable to widespread exposure to substance abuse and violence in the home, school and neighbourhood, and exposure to violence increases the probability of youth involvement in violence. Recently, the Minister of Basic Education, Ms Angie Motshega when addressing the media at Langa Township outside Cape Town, said that “the levels of violence in our schools, bullying, drugs and gangs is really getting out of hands” (SABC News, 22/2/2014, 7am).

Studies by Mncube and Harber (2013), Furlong and Morrison (2000), O'Moore (2005), Greene (2008), Samara and Smith (2008), and Favela (2010) moots the school as an ideal site to equip learners with skills to deal with anger, frustration, violence and racial intolerance without resorting to violence. Crime and violence cannot be allowed to fester unabated and be considered a way of life. In collaboration with other stakeholders, schools should have policies in place to tackle the issues, School Psychological Services being one such initiative.

Because of the existence of negative socio-economic factors in and around schools, including the high unemployment and poverty rates which influence the increase in violent and rampant crimes such as domestic violence, murder, rape and other social ills, learners are highly predisposed with dire psychological consequences. In economically depressed communities these problems are exacerbated and as a result children who are either victims or witnesses to such crimes are highly traumatised. Many children see this as a way of life and therefore imitate such violent behaviours (Crespi & Hughes, 2004). Although many children may be said to be “resilient and able to thrive or survive through these violent environments without emotional scarring” (Lewis, 1999, p. 10), most battle to live successfully through it. In this regard, Lewis (*ibid*) suggested that there is need for a professional in the school setting to help school learners on their road to recovery. The sentiment is shared by Anthun (1999, p. 164) who posits that “there is a mismatch of needed and provided services to schools and their students, with too much time being spent on the psychological assessment of individuals and psychological report writing at the cost of consultative problem-solving, prevention and systems intervention”.

Although complex and multi-faceted violence and bullying are, and requiring a commitment and collaboration from government and stakeholders to address, individual schools are being called upon to implement programmes to counteract these negative forces (O'Moore, 2005). According to Batsche and Knoff (1994), whether bullying occurs in the form of physical aggression, intimidation in a power struggle, sexual harassment, ridicule or teasing, the bottom line is that students are unable to demonstrate appropriate interpersonal skills and fear the environment they are in. Effective schooling cannot occur under conditions of intimidation and fear. As Skiba and Peterson (2006, p. 168) suggest, "we need to move beyond guns, gangs and drugs to include all variables that pose a potential threat to school safety". According to Ward (2007), violence of any form models violence for learners and in turn perpetuates the culture of violence. As Carolissen (2012) puts it, children are exposed to violence daily which leads to exceptionally high levels of stress, with serious consequences for their mental health. Through a programme of psychological services, schools should implement meaningful and informed intervention strategies to curb violence and aggressive behaviour on campuses. Victims of violence and perpetrators can benefit from some form of psychological intervention. Hence, according to South African Council for Educators (SACE, 2011, p. 34), "it is important that counselling services are made available for learners in dealing with causes and effects of school-based violence".

1.4.6 Teenage sexuality and pregnancy

The provision of sex education in schools can provide learners with information about sex so that they make informed choices on the subject. However, a single Life Orientation lesson on sex does not adequately deal with the complexity of issues around sexuality which young people

grapple with daily. Whether we like or not, young people are having sex, consensual or coerced. Sathiparsad and Taylor (2011) maintain that unplanned teenage pregnancy is a problem in many developed and developing countries. As a developing country, South Africa is faced with ever increasing rates of teenage pregnancy steadily approaching epidemic proportions. According to Vergnani, Filsher, Lazarus, Reddy and James (1998) adolescent sexual behaviour in South Africa is characterised by early onset, multiple partners and low contraceptive use. As a result many young people fall pregnant and drop out before completing matric (i.e., Grade 12). Some are infected with sexually transmitted illnesses. According to Holborn (2011), drop-out rates in secondary and tertiary education in South Africa are very high and nearly 50 000 school girls fell pregnant in 2007. It is important that children learn about sex at school since the median age of first sexual intercourse is 16 for both young men and young women. Bell (2009) posits that schools should instil a sense of responsibility regarding sexual activity and empower them to make informed and responsible decisions. A comprehensive sexuality education programme, which is a vital part of School Psychological Services, will make it possible for schools to produce sexually responsible youth and thereby reduce incidents of teenage pregnancy.

Through the curriculum, schools should equip learners with knowledge and skills to take responsibility and control of their own health, behaviour and relationships (Vincent, 2007). According to Francis (2010), schools are suitable intervention sites as virtually all young people attend school before engaging in sexual intercourse. Like the family, the school is a key socialising agent in young people's lives. But Rooth (2005) maintains that LO educators are not adequately trained to deliver sexuality education effectively. According to Visser (2005), teachers did not conceptualise sex education and emotional involvement with learners as part of

the teacher's role; their role was to provide academic input. The focus in education is on improving the standard of education in schools, not implementing the life skills and HIV/AIDS programme with limited human resources. Trained schools counsellors working collaboratively with psychologists and social workers can fill the void and deliver the services.

1.4.7 Lack of career guidance in schools

One issue which young people grapple with persistently, implicating School Psychological Services, is career decision-making. According to Julien (1999) young people are in the process of making decisions regarding their future careers and encounter barriers relating to the information that is needed, where to find the information, the sources of information or the fact that the information required may simply not exist. To this day, many young people are choosing careers without adequate information (Donald *et al.*, 2000; Watson (2006). Demonstrating the impact of career education on higher education, Bojuwoye and Mbanjwa (2005) reveals that new students in tertiary institutions are mostly confused about the courses they want to take and degrees or diplomas they wish to pursue. It is predominantly students of African descent who experience this problem, which, to a large extent, is the result of the lack of Psychological Services, especially career education, in most African secondary schools. According to Bojuwoye (2002), it is mainly students from poor township communities who are overwhelmed and intimidated by the university environment. In the same vein, an earlier needs survey administered to all first year students at the University of the Western Cape (Chuenyane, 1990) indicated that many first-year students were dissatisfied with the level and extent of guidance received at school, and were consequently experiencing problems with making career choices. This corroborates the findings of Stead and Watson (2006) that “the lack of Guidance and

Counselling services in black schools caused many students entering university reporting a high level of career indecision”. Consequently, young people are making one of life’s most important decisions in the transition years based on scant information. This is caused by a lack of adequate preparation, career skills, and poor financial support. These presuppose the need for Psychological Services, specifically Guidance and Counselling, in schools, especially secondary schools, to provide students with opportunities to reach their full potential in the areas of educational, vocational, personal, and emotional development (Lunenburg, 2010).

1.4.8 Substance abuse in schools

Substance abuse in schools is one issue that should be prioritised as it affects learners’ mental health and well-being. According to Maiden (2001), children as young as eight or nine are exposed to and using drugs, and Botvin *et al.* (1990) contend that as many as 25% of male adolescents and 10-15% of female adolescents abuse alcohol at least once a week. In her book on drug abuse in schools, Searll (2002, p. 147) maintains that “the solution to youth substance abuse lies in the implementation of Life Orientation, which includes Life Skills education as one of the five learning areas of Curriculum 2005”. In dealing with drug-related issues, realistic expectations of a school’s role in promoting a healthy lifestyle includes, *inter alia*, providing a Life Skills development programme and counselling services. The skills in a Life Skills programme should include building relationships, resisting pressure by using a variety of communication styles (including assertiveness), making informed decisions, problem solving, clarifying values and building self-awareness and self-confidence (Searll, 2002). This is an important role that the school should fulfil in collaboration with parents and the community. Drugs, sex and HIV and AIDS are real issues that learners encounter, often with little or no

applicable knowledge and skill. As Pandor (2006) commented, abuse and drug usage should not be allowed to become a familiar and accepted part of schooling, otherwise the future of school children would be lost, and added that counsellors should be employed to help learners at-risk. They would be able to, through a life skills programme, employ what Kauffman, Bantz and McCullough (2002) describe as the 'catch-it-early' approach which would facilitate the prevention of problem behaviours before they worsen.

1.4.9 Inadequacies of the Life Orientation curriculum

Life Orientation, as a replacement for guidance and counselling and an important aspect of School Psychological Services, was initially seen as a better and improved substitute which schools enthusiastically embraced. However, though the content remained unchanged, its shortcomings became apparent with time. Marneweck, Bialobrzeska, Mhlana and Mphisa (2008) maintain that the Department of Education was failing to tackle AIDS-related issues in the classroom. They are concerned with the increase in the number of children affected and that the Life Orientation (LO) syllabus was not sufficient. They recommended that more teachers be trained to serve as school counsellors to provide affected learners with emotional support. As there are no professional counsellors in many schools, teachers need to acquire basic counselling skills through some form of psycho-counsellors, easily identify problems as they emerge and would therefore be able to deal with the multitude of social problems as they occurred (Pillay, 2012). According to Marneweck *et al.*, (2008), teachers and learners affected or infected with HIV and AIDS need psycho-social support in the form of counselling, which includes offering emotional support, so they come to terms with the overwhelming psycho-social trauma and its eventuality.

Earlier, Mashile (2000) asserted that the needs and concerns of today's learners are different from those of the past. Not only is the context different, but there is a sense of depersonalization in the schools, and continuing lack of quality education. To meet these needs, systematic processes at school and community level are required that will enable all learners to achieve maximum intellectual, personal, social, emotional, career and physical development. Equipping teachers with basic counselling skills will effect content mastery as well as enhance the psychological well-being of learners. However, Life Orientation, which replaces Guidance and Counselling in the school curriculum, does not address the anomaly.

With learners presenting with so many behavioural and academic problems (e.g. substance abuse, violent behaviour including bullying, teen sexuality and pregnancy, poor academic performance), there is need for the school as a microcosm of society to have programmes and systems in place to redress these developmental and socio-cultural challenges. As research studies indicate (Macleod, 2009; Nicholas & Cooper, 1990; Rooth, 2005; Stead & Watson, 2006; Steyn & Wolhuter, 2000) a School Psychological Services programme is meant to equip learners with skills for successful living and learning. Thus, Dawson and Singh-Dhesi (2010) maintain that "it is important for schools to recognise that children and young people's mental health and emotional well-being is central and underpins all the work around improving achievement and outcomes". Well-being entails emotional well-being, psychological well-being and social well-being (*ibid*).

According to the then Department of Education (1997, p. 14), “effective learning is directly related to and dependent on the social and emotional well-being of the learner. This is corroborated by Strein *et al.*, (2003), who maintain that education and health, including mental health, are intrinsically linked. Thus, it is important to recognise that particular conditions may arise within the social, economic and political environment in which the learner lives which impact negatively on their social and emotional well-being, thus placing the learner at risk of learning breakdown”. Good social, emotional and psychological health helps protect children against emotional and behavioural problems, violence and crime, teenage pregnancy and the abuse of drugs and alcohol. As Renk (2005a) points out, children with difficulties are likely to continue having problems throughout their childhood and into adulthood, and are more likely to be exhibited during adolescence, hence the need for early psychological interventions.

1.4.10 Uneven distribution of resources in schools

Amongst the many legacies of apartheid which impacts on the provision of School Psychological Services is the uneven distribution of resources, specifically due to the race-rationed per capita expenditure which was highly unequal in favour of whites (Mothata, 2000). According to Van Niekerk and Prins (2001, p. 236),

“South Africa as a developing country has an enormous need for Psychological Services due to the political changes as well as the social trauma that the country has been through in recent times. These needs are greater than the present available resources that are provided and they fall into three categories which are preventive, rehabilitative and curative”.

But, as Carolissen (2012) points out, there is an unequal distribution of psychological services throughout the country, and financially secure schools continue to reap the benefits thereof. According to Pillay (2011), the majority of schools that service the blacks do not have school counsellors but many of the formerly white schools (Ex-Model C) are able to employ them because of the high school fees they levy. This echoed by Van der Riet and Knoetze (2004) who posit that the legacy of the apartheid system is still evident in South African society, especially in the allocation of resources, despite changes in educational policies since 1994. The continuing differences in wealth and social class and other factors are producing a situation of persistent mental health inequalities. Hence, some schools have an advantage over others in accessing resources. A number of obstacles such as inadequate training, insufficient material and staff shortages have made it difficult for the government to implement the life skills programme in all South African schools. According to Van der Riet and Knoetze (2004), reorienting such a pervasive system of imbalance will take many years. In 2004 the then MEC of KwaZulu-Natal Education, Ina Cronje, reportedly lambasted the lack of professional Psychological Services in many schools where many children were traumatised and some headed households because their parents had died of AIDS. Cronje stated that:

“There are not enough counsellors in our schools. While most affluent schools have Psychological Services, poor schools cannot afford to employ counsellors. What we can do is fire-fighting, send Psychological Services, but these people cannot counsel children over an extended period” (Madlala, Daily News, June 30, 2004, p.6)

Her response alluded to the inequitable allocation of resources between affluent (mostly White) schools and poor (Black) schools, the former having guidance counsellors as fulltime employees

or freelancers and the latter having none as a result of rationalisation and redeployment of resources. This arose because the government's fiscal policy does not cater for the employment of school counsellors due to competing priorities in education. Schools – rich or poor – should attend to learners' affective needs, not just educational needs. Trying to unravel the complexity of the problems discussed above, Govender (*Sunday Tribune*, November 13, 2005, p. 1) postulated that the absence of school guidance counsellors had left a void at schools and that "Guidance counsellors were support structures. Learners knew there was someone they could speak to at school and get help" (*Sunday Tribune*, November 13, 2005, p. 1). As Pillay (2011, p. 351) put it, "there are many young people with psychological problems in schools and a limited number of people who could help". The South African reality is that counselling services are mostly provided by teachers who are not trained but offered to do so out of their own sense of care and responsibility. Hence, there is a need for trained school counsellors and psychologists to address the anomaly.

1.4.11 Conclusion

The challenges and concerns described above contribute to youth problem behaviour and necessitate the return of Psychological Services to all South African schools. As early as 1999 the then Premier of KwaZulu-Natal and Acting Provincial Education Minister, Mr Lionel Mtshali spoke about the neglect of the DoE's School Guidance and Psychological Services division and lamented the loss of highly-qualified psychologists, as a result of rationalisation of the Guidance and Counselling services. He outlined his plans to resuscitate the services and indicated that the needs of learners should be addressed (*Daily News*, June 20, 2001) and

expressed the need for school counsellors to address most of the problems learners experience, including levels of violence and drug abuse.

With the issues such as substance or drug abuse, violence, bullying, HIV/AIDS and teenage pregnancy, the topical slogan or catch phrase for any psychological services programme would be '*prevention is better than cure*', referring to primary, secondary and tertiary prevention, elements of a proactive approach to Psychological Services Programme. As Renk (2005a) asserts, issues of the young and issues within the context of the parent-child relationship must be addressed by school psychological services. Notwithstanding, there has been a growing movement over the past decade toward both school-based and school-linked mental health services (Strein *et al.*, 2003). Education cannot separate the emotional from learning. As Carolissen, Rohleder, Bozalek, Swartz and Leibowitz (2010) point out, well-being is developed by fostering capabilities and allows all learners to flourish, both personally and collectively, and can make education a more fair process. This is what Gilligan (1998, p. 13) calls 'the deep split between education and care' which creates a pervasive social distance between schools and other service systems.

It is not my contention that psychological services are not available in schools, but rather that they are not explicitly organised. Whilst some schools offer the services and have the financial means to employ qualified school counsellors, especially ex-model C schools, most disadvantaged schools operate without specialists but still manage to provide some services, e.g., career guidance. Thus, this study aims to understand the state of School Psychological Services from participants' (i.e., learners, educators, school counsellors, and principals) perspectives.

1.5 Definition of terms

In the context of this study:-

School Psychological Services (SPS): refers to services, including guidance and counselling, meant to promote and enhance the mental health of learners in order to facilitate learning, behavioural and lifestyle changes.

School / Educational psychologist: a psychologist who applies psychological and educational expertise to support students to achieve academic success, psychological health, and social and emotional well-being.

School counsellor: refers to an educator who was trained in psychology to design and provide psychological support to learners with problems or psycho-social issues affecting them.

Principal: refers to the head of the school.

Educator: refers to someone who is trained and qualified to teach or someone who carries out teaching duties, and is remunerated for doing so.

Learner: refers to a child who needs support from the teacher to develop academically.

Adolescent: refers to a teenager, a child aged between the ages of 13-19.

Psychosocial support services: a continuum of care and support which is meant to promote an individual's psychosocial well-being.

Mental health: a state of well-being in which an individual realises his/her potential, can cope with the normal stresses of life, is productive and able to make a contribution to the community.

1.6 Objectives of the study

The aim of the study is to investigate the state of School Psychological Services and participants' (viz., learners, school counsellors, educators and principals) experiences psychological services provisioning in selected secondary schools in KwaZulu-Natal.

The objectives, drawn from the aim of the study, are to investigate participants' experiences of School Psychological Services, guided by the following sub-headings:

- (5) their understandings of Psychological Services and their impact on learners' well-being and academic performance;
- (6) learners' needs for School Psychological Services;
- (7) the current status and various forms of Psychological Services; and
- (8) the challenges or obstacles to the effective implementation of Psychological Services.

1.7 Key Research Questions

The study is guided by one primary research question which is:

- What are participants' (viz., learners, school counsellors, educators and principals) experiences of School Psychological Services provisioning in selected secondary schools in Kwazulu-Natal?

The sub-questions which underpin the above research question are:

- a) What are participants' (viz., learners, school counsellors, educators and principals) understandings of Psychological Services and their impact on learners' well-being and academic performance?
- b) What are learners' needs for School Psychological Services as identified by participants (viz., learners, school counsellors, educators and principals)?
- c) What is the current status of Psychological Services (including the various forms of School Psychological Services and resources) in the selected secondary schools?
- d) What are the challenges or obstacles to the effective implementation of Psychological Services in the selected schools?

1.8 The research design

The research approach adopted in this study is a mixed methods design, which involves collecting and analysing both qualitative and quantitative data in the context of a single study. This means that apart from gathering participants' perspectives on School Psychological Services it would also provide input (i.e. frequencies) on the percentages of participants in agreement with statements on the questionnaires. The study utilises an interpretive lens and is anchored in a constructivist (i.e. post-modernist) paradigm according to which reality is considered socially constructed. The focus is on participants' understandings of School Psychological Services as they actively construct new knowledge in their interaction with the environment. According to this paradigm, "...rather than a single objective reality, there are multiple realities, each related to the complexity of natural occurring behaviour, and

characterized by the perspectives of the respondents” (McMillan 2000, p. 5). This means that a single event or incident is subject to many interpretations. The reality that is spoken about in this case is experiential reality, that is, the experiences of the participants. The paradigm is relevant in the sense that the study not only investigated how the participants understood and perceived the need for School Psychological Services, but also how they perceived School Psychological Services as supportive to young people as they navigate through life and grapple with reality (i.e. subjective reality) in their journey to self-discovery.

The study used a multi-site, mixed methods exploratory research design, and gathered data about Psychological Services in selected schools from the perspectives of the consumers of the services (i.e. learners, school counsellors and principals). I wanted to see School Psychological Services as the participants of this study see them in terms of their needs for the services, the nature and characteristics of the current School Psychological Services, the resources available for and the challenges to effective implementation of School Psychological Services. The capacity of school programmes to shape learners’ experiential reality is important, including how learners experience the curriculum in relation to their growth and development and how the curriculum prepares them for adulthood. The relationships with significant others play a major role in influencing how young people make sense of the world around them. Changes in the learner develop within such relationships: relationships with parents, family, friends, teachers, and in this case, school counsellors.

To achieve the objectives of the study I gathered quantitative data first by means of questionnaires, which were followed by qualitative interviews with key participants. I deemed

the questionnaire as the best method of data collection for a sample size of 773 high school students. This concurs with McMillan's (2000) assertion that "questionnaires are used extensively because they provide the best way of obtaining data for a wide range of research problems, including surveys with large numbers". However with smaller groups like the school counsellors and principals, interviews were conducted. The overriding aim was to examine learners' needs for School Psychological Services and come up with suggestions and recommendations on how the *status quo* can be amended.

1.9 Conceptual and theoretical frameworks for the study

Two theoretical frameworks were considered useful in this study. The dominant and overarching framework is social constructivism (Roeser, Eccles & Sameroff, 1998; Mazzotti, 2008; Mahoney, 2005; Donald, Lazarus & Lolwana, 2002), supported by the systems theory (Donald, Lazarus & Lolwana, 2002; Paquette & Ryan, 2001; Marais & Meier, 2010; Stone, Berzin, Taylor & Austin, 2008). Social constructivism emphasises the importance social interaction in the transmission of knowledge, which involves the construction and transmission of values, information, and ways of understanding. The provision of psychological intervention is an example of learning as meaningful learning occurs when individuals are engaged in social activities (Kim, 2001), wherein an informed adult (i.e. psychologist, counsellor or educator) acts as a mediator between the context, beliefs, feelings and behaviour to co-construct meaning (Roeser *et al.*, 1998). According to Donald *et al.*, (2002, p. 104), mediation and scaffolding are important tools in the construction of knowledge and enhancement of mental health.

The ecosystemic perspective, on the other hand, focuses on the need for the school as a microcosm of society and the space where learners spend most of their days to provision psychological services in order to address the needs of adolescents, and the challenges they encounter in their development that often overwhelm their ability to cope and, as a result, affect their academic performance. The ecosystemic theory rightfully sees School Psychological Services as essential services for creating harmony between the school and learners' needs and its ability to satisfy them, and that any disharmony between the school environment and learners' needs can give rise to psychological distress.

Conceptual frameworks revolve around the concept of health promoting schools, which are defined as schools which provides a combination of services to ensure the physical, mental and social well-being of learners so as to maximise their learning capabilities (Departments of Health and Basic Education, 2012). They promote healthy lifestyles by developing supportive environments conducive to the promotion of health, a state of well-being which includes physical, social, psychological, spiritual and environmental health (Department of Health, 2000). The above theories will be utilised in the analysis of data.

1.10 Outline of the Thesis

Chapter One provides an introduction to the study, including the background of the study, the purpose, its rationale, research questions and the nature of the study.

The literature survey in **Chapter Two** deals with all aspects of Psychological Services and spotlights on the discourses on Guidance and Counselling, and all the support services provisioned to improve all aspects around the adolescent learners' psychological needs.

Chapter Three focuses on the conceptual and theoretical frameworks underpinning the provision of School Psychological Services.

Chapter Four offers a discussion of the research design and methodology used in the study, which involves a description of procedures followed in the identification of research sites, sampling procedures, research instruments and the generation and analysis of data, as well as issues of ethics, reliability, validity and trustworthiness.

Chapter Five focuses on the presentation of the results.

Chapter Six provides an analysis and discussion of the results.

Chapter Seven provides a summary of the study findings, conclusions and implications, as well as recommendations of the study. It also deals with the contribution of this study and its limitations.

The next chapter focuses on the review of literature pertinent to different aspects of the School Psychological Services Programme.

CHAPTER TWO

SCHOOL PSYCHOLOGICAL SERVICES

If the emotional agendas of learners remain hidden and submerged in the day-to-day classroom interactions, the growth of psychological maturity will surely be arrested. We cannot learn to control, redirect or incorporate legitimate, normal emotional and psychological concerns if they are systematically avoided, shut off or never discussed (Sprinthall & Collins, 1994).

2.1 Introduction

Chapter One focused on the orientation and background to the study. Chapter Two focuses on an overview of policies which laid the foundation for School Psychological Services as well as the different aspects of Psychological Services in South African schools. According to McMillan (2000), a review of literature provides an important link between existing knowledge (previous research) and the problem that is being investigated. The purpose of my literature review is to relate previous research to the problem under investigation. However, the review begins with a look at policy pronouncements which impact on the delivery of School Psychological Services in South African schools.

The history of School Psychological Services in South Africa can be traced back to the introduction of School Guidance and Counselling in White schools in 1930, and the establishment of the first Psychological Services by the Department of Bantu Education in 1960. Guidance was only introduced as a separate non-examinable school subject in the Black junior and senior secondary schools in 1981 (Ferron, 1990; Euvrard 1996).

In order to make sense of my research focus and my understanding of School Psychological Services, I will employ a diagrammatical representation below:

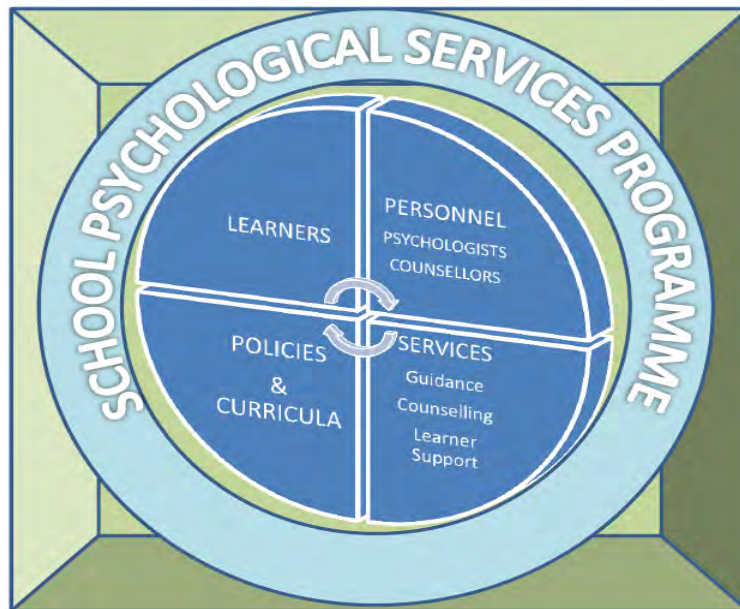


Figure 2.1: Quadrants of School Psychological Services

The diagram represents the four pillars (i.e. quadrants) of psychological services, namely, personnel, learners, services and policies, which include the curricula. In the South African context, the only relevant curriculum is the Life Orientation curriculum. Ideally, they should complement each other for the benefit of the learner.

2.2 The state of School Psychological Services

According to Donaldson (2002, p.4) “reforms in American Education prior to 1950 were significantly shaped by personalities such as William James, Jean Piaget, John Dewey, Sigmund Freud, Karl Marx, Carl Rogers and Abraham Maslow. Their work influenced an educational reform movement which nurtured the idea that education should cater to both the emotional and intellectual development of the child. But, the movement swung so far to one side that slowly the

‘intellectual development’ part of the equation began to be ignored in favour of the ‘emotional’”. This means that more emphasis was placed on the emotional aspect of learners at the expense of the intellectual or rational aspect, a technical hitch or oversight with potential detrimental effects.

Hence, Sprinthall and Collins (1994), in their recommendation for school reform and the placing of guidance in the mainstream of the school, mooted that trained guidance counsellors can respond to the legitimate emotional needs of the learners in the classroom. According Sprinthall and Collins (1994),

“if the emotional agendas of learners remain hidden and submerged in the day-to-day classroom interactions, the growth of psychological maturity will surely be arrested. We cannot learn to control, redirect or incorporate legitimate, normal emotional and psychological concerns if they are systematically avoided, shut off or never discussed”

(Sprinthall & Collins, 1994).

According to Vergnani *et al.*, (1998, p. 46) “South African youth, many of whom have been historically marginalised and disadvantaged, are at risk of the consequences of ‘new morbidities’ resulting from early and/or unprotected sex, drug and alcohol abuse, stress and various forms of violence, including high rates of exposure to political violence, sexual, physical and emotional abuse”. Clearly, children and youth of today face enormous challenges and the question one can ask is: how can their school experiences help them meet these challenges? Through education South Africa wants to produce capable and confident learners who will be productive, responsible caring members of the workforce and the community. While academic proficiency is of paramount importance in our knowledge and information age, social and emotional learning

are also crucial for the kind of success we want. This means that for education to be effective a balance should be struck between the emotional and intellectual aspects of learners, and this thesis argues that only trained qualified or certified school counsellors and psychologists attend to the emotional needs of learners, thereby making a profound/significant contribution in improving the psychological well-being of learners. This is in view of the fact that educators are overworked and expecting them to attend to learners' emotional issues will divert their attention from learners' academic development. This means that psychologists, school counsellors and educators complement each other and make each other's job a lot easier because when learners are contented they are easily controlled and present minimal behavioural and disciplinary problems.

What education policy statements inform Psychological Services in South Africa? The section below answers the question.

2.2.1 A historical overview of guidance and counselling

In the early 1920s the words Guidance and Counselling were used interchangeably until John Brewer (1932) used the terms 'education' and 'guidance' synonymously indicating the relationship between Guidance and Education, that they are the two sides of the same coin and that you cannot have the one without the other. In the United States of America (USA), the National Defence Education Act of 1958 acknowledged the vital link between Guidance, the well-being of the nation and education (Gysbers & Henderson 2006). Guidance – evolving from pastoral counselling – included educational-vocational-personal-social information not otherwise

systematically taught in academic courses. Guidance was reoriented from what had become an ancillary, crisis-oriented service to a comprehensive programme (Gysbers & Henderson, 2006).

Traditional approaches to guidance emphasized techniques rather than the purpose of guidance, and, as a result, counsellors were known for the techniques they used, not for the outcomes these techniques produced in individuals (Gysbers & Henderson, 2006). As Gladding (2000) state, much of the early work in guidance occurred in schools: an adult would help a student make decisions, such as deciding on a vocation or course of study. That relationship was between unequals, teacher and learner, and was in helping the less experienced person find direction in life. Similarly, children have long received ‘guidance’ from parents, ministers, scout leaders, and coaches. In the process they have gained an understanding of themselves and their world. This type of guidance will never become *passé* or obsolete, no matter what the age or stage of life, a person often needs help in making choices. Yet such guidance is only one part of the overall service provided by professional counselling.

What follows is a synopsis of the development and implementation of Guidance and Counselling services in schools locally and internationally. I chose to focus on three countries, the USA because its pioneering works on initiatives focusing on learners’ emotional wellbeing, Nigeria and Botswana as former colonies of the United Kingdom whose education system – like South Africa – was an extension of the British education system.

2.2.1.1 Guidance and Counselling in the United States of America

It is important to trace the roots of Guidance and Counselling in schools and how it influenced educational reforms in South Africa. According to Gysbers (1994, p. 55), “modern Guidance and Counselling in the USA was born during the early 1900s at the height of the Progressive Movement – a product of the Industrial Revolution – which sought to change negative social conditions associated with industrial growth”. The Guidance and Counselling movement began then with more emphasis on vocational or career guidance. Secondary school Guidance and Counselling also began in the early 1900s when its primary emphasis was on guidance activities that would help better citizens. Frank Parsons was regarded as the father of the guidance movement because he influenced the early growth of the profession by establishing a vocational bureau in Boston in 1908 – the purpose of which was to place school leavers and drop-outs in suitable employment. His scientific approach to choosing an occupation is summarized in the following paragraph:

“No step in life, unless it may be the choice of a husband or wife, is more important than the choice of a vocation. The wise selection of the business, profession, trade, or occupation to which one’s life is to be devoted and the development of full efficiency in the chosen field are matters of deepest moment to young men and to the public. These vital problems should be resolved in a careful, scientific way, with due regard to each person’s aptitudes, abilities, ambitions, resources, and limitations”. (Gysbers & Henderson 2006, p. 4)

Guidance was meant to make the transition of young people from school to work more efficient, successful and less stressful, and also prepare youngsters to meet the demands and rigours of a competitive and materialistic society (Gysbers & Henderson 2006). The 1920s saw a shift in

guidance, in theory and practice, with less emphasis on guidance for vocation and more on education as guidance. The forerunners of the time, including people like John Brewer, were increasingly more educationally oriented. Brewer pushed for the establishment of secondary school guidance. With the advent of Seven Cardinal Principles in 1917 and the National Education Association's Commission on the Reorganization of Secondary Education, less attention was being focused on the social, industrial, and national-political aspects of individuals and more attention given to the personal, educational, and statistically measurable aspects of individuals. Within the school setting, there was an apparent displacement of the traditional vocational, socioeconomic and political concerns from the culture at large to the student of the educational subculture whose vocational socialization problems were reinterpreted as educational and psychological problems of personal adjustment (Gysbers & Henderson 2006).

According to Gladding (2000) Brewer believed that both guidance and education meant assisting young people in living. His ideas did not gain wide acceptance at the time, but under the name *Life Skills training* they have become increasingly popular. A new model of vocational guidance emerged, one that was clinical in nature and began to emphasize a more personal, diagnostic, and clinical orientation to the student, with increasing emphasis on psychological measurement. Counselling became of primary concern. Vocational guidance became problem oriented, centering on adjustable psychological and personal problems (Gysbers & Henderson 2006).

Guidance became more firmly incorporated into schools in the 1930s and its proponents felt that educators were in a unique and better position to deliver guidance. Personal counselling - the goal of which was student adjustment through personal contact between counsellor and student -

became part of guidance. Carl Rogers' publication of *Counselling and Psychotherapy* in 1942 had a 'steamroller impact' on Guidance and Counselling in the schools and precipitated the new field of counselling psychology. Through the George-Barden Act of 1946, school guidance received material, leadership, and financial support (Gysbers & Henderson 2006). According to Chuenyane (1990), Guidance came into being as a result of the cold war between the East and the West. The launching of the Sputnik by Russia in 1957 jolted the U.S. Government to focus particular attention on guidance services in the schools. With the shortage of engineers, and trained personnel in general, the country embraced guidance as the solution to their national problems. The National Defence Education Act of 1958 ensured the strengthening of the guidance services by providing funding for the training of school counsellors. Training programmes were established together with in-service training programmes for secondary school teachers and counsellors (Chuenyane, 1990). It was in the 1960s when guidance became known as Learner Personnel Services and included Psychological Services, health, social work and attendance. Guidance was seen as one of the services that sought to facilitate learner learning through an interdisciplinary approach.

In the 1970s guidance was reoriented from a crisis-oriented service to a comprehensive programme. This was done not only to make guidance accountable but developmental too. A comprehensive guidance programme included student competencies, its activities conducted on a regular and planned basis to assist students, and included services such as assessment, information, consultation, counselling, referral, placement, evaluation and follow-up. Also it involved a team of all staff members with professionally certified school counsellors at the helm (Gysbers & Henderson, 2006).

Guidance in American schools is being provided to learners in all educational levels, from kindergarten through to higher education. Hence, all schools have school counsellors or guidance counsellors ensuring the effective implementation of guidance and counselling services.

2.2.1.2 Guidance and Counselling in Nigeria

According to Adegoke and Culbreth (2000), although counselling can be described as a North American initiative, it has grown in other parts of the world. Nigeria, being one of the first countries to gain independence from colonial rule in the 1960's, had guidance and counselling emerging as an identifiable aspect of its educational enterprise in the mid '50s. The commencement of modern guidance in Nigeria can be traced to 1958, through the efforts of Catholic sisters in St. Theresa's College in Ibadan (Ndum & Onokwugha, 2013). In 1975, the first Department of guidance and counselling in Nigeria was established at the premier University of Ibadan, and in recognition of the importance of guidance and counselling to her education, the Nigerian Government included it in the National Policy of Education of 1981, which is commonly referred to as the 6-3-3-4 system of education (*ibid*). The policy recognised the complementary role of educational services – such as guidance and counselling – as critical supportive components of the education system. Guidance counsellors played an important role in the implementation of the system, and this influenced all State Governments to establish guidance and counselling units in their Ministries of Education. According to Modo, Sanni, Uwah and Mogbo (2013), guidance and counselling is regarded as an educational service which is considered as a coping strategy for improved academic performance. According to Oye, Obi,

Mohd and Bernice (2012, p. 26), “the essence of incorporating guidance and counselling into the school system was to eliminate overwhelming ignorance of many young people on their choices of career prospects and personality maladjustment among school children”. Thus, the counsellor is seen as an academically trained individual tasked with rendering services in school and out of school, to help his/her beneficiaries achieve maximally in spite of all limitations. Modo *et al.*, (2013) recommend that the place of guidance and counselling services is in the secondary schools, and that if students are expected to cope with the challenges of academic activities, guidance and counselling should be properly implemented to the letter.

According to Adegoke and Culbreth (2000), school counselling is relatively new and is directed mainly at secondary school students to help them in their response to the social and economic changes taking place in society and enable them to live effectively as adults after the completion of their formal education. Being a former British colony, the Nigerian education system was largely shaped by British practices (*ibid*) though counsellor training is on a much smaller scale and counselling was initially restricted to educational settings. The spirit and impact of guidance and counselling is now widely felt and recognised in Nigeria. The Nigerian education system has school counsellors as a permanent feature, one or two per school, with sole mandate of attending to a myriad of issues affecting students. The number of professional or full time counsellors, teacher counsellors, and ‘paracounsellors’ or career teachers in the secondary schools is rapidly growing with multiple coordinating bodies such as Counselling Association of Nigeria (CASSON), which was formed in 1992. The para-counsellors are school personnel who provide guidance and counselling services in secondary schools. The Federal State and government

ensures that they are both remunerated for their services the same way teachers are. As the Nigerian National Policy on Education (NPE, 2002, p. 50) states

“In view of the apparent ignorance of many young people about career prospects and in view of personality maladjustment among school children, career officers and counsellors will be appointed in post-primary institutions”.

According to Oye et al., (2012), the importance of guidance and counselling programme in secondary schools include bringing to the students an increased understanding of the educational, vocational, and social information needed to make wise choices. It is thus important that principals recognise that schools cannot function effectively without a guidance counsellor and should make provision for guidance and counselling on the school time table. As Adedipe (2006) put it, although new in the Nigerian education landscape, guidance and counselling continues to have an impact and is still evolving.

2.2.1.3 Guidance and Counselling in Botswana

Seen as one of the most stable governments in Southern Africa, a representative of the SADCC region, Botswana has been able to achieve both political stability and very strong economic growth. Consequently, Botswana has been able to develop and provide a thorough system of education, in important aspect of which has been the development of the counselling profession (Stockton, Nitza & Bhusumane, 2010). As noted by Navin (1992), the transition of Botswana into a modern society brought with it a number of serious social challenges such as increased rates of unemployment, crime, teenage pregnancy, and substance abuse. Increased urbanisation

resulted in the breakdown of the extended family support system (Bushumane, Maphorisa, Motswaledi & Nyathi, 1990). A crucial factor in the development of counselling in the country was the need to address human resources to meet the needs of the expanding economy by, amongst other things, providing career guidance. According to Stockton *et al.*, (2010), the provision of career guidance dates back to 1963, when guidance and counselling was introduced in Botswana, and has become an important component of education to date. Shumba, Mpofu, Seotlwe and Montsi (2011) opines that the government of Botswana believes that guidance should be a continuous process throughout life, hence it should be introduced early in life or during the formative years when habits, attitudes and behaviours are being developed. Whilst the emphasis on career education persisted, efforts were gradually undertaken to develop a more comprehensive guidance and counselling programme in schools. Guidance and counselling services were delivered by teacher-counsellors, who either volunteered or were selected for the role. Teacher-counsellors were mostly subject-teachers who also carried out counselling duties, mostly with no training and often without compensation.

Counselling services were gradually focused on mental health issues as a result of increasing rates of HIV/AIDS infection in the country, which was 37% of the adult population. An increased demand of mental health counselling services put pressure on the training of service providers, resulting in many people working as counsellors with limited training. This resulted in the formation of the Botswana Counselling Association in 2004. School guidance and counselling continues to develop and in 2002 a comprehensive guidance and counselling curriculum was implemented by the Ministry of Education in 2002 (Stockton *et al.*, (2010). However, there are many challenges affecting the delivery of guidance and counselling services.

One such challenge is the development of an in-service programme for school counsellors (guidance counsellors). Similar to the South African experience, guidance and counselling services are not given much attention or value by staff and its activities are not covered in student exams (Stockton *et al.*, 2010).

According to findings of a study by Shumba *et al.*, (2011), teachers were neither well prepared nor properly supervised to teach in the subject. Also, there is an ongoing clash between the traditional and Western approaches to the provision of mental health services, and most clients tend to consult traditional healers. Despite this, counselling services are flourishing in Botswana to this day and schools have guidance counsellors (School Counsellors) carrying out the mandate of delivering services to young people who need them, including those with disabilities.

It is abundantly clear from the above discussion that guidance and counselling services are a *sine qua non* in the education systems of both developed and developing countries (viz. USA, Nigeria and Botswana) though they experienced unique challenges with the roll-out.

2.2.2 Policies which inform School Psychological Services

The history of Psychological Services in South African schools, though scanty and somehow sketchy, can be traced back to pieces of legislation such as the Special Schools Act of 1948, which focused on learners with disabilities, and the Bantu Education Act of 1953, which was mainly focused on the education of the black child. There are many other policy documents which inform School Psychological Services and the delivery or provision thereof, but the ones

which made the most impact and are very relevant to Psychological Services are discussed below:

The De Lange Report (1981)

This is the one policy document which laid a solid foundation for Guidance and Counselling in South Africa and somewhat changed the education landscape. The De Lange Report highlighted shortfalls in school guidance programmes and made some vital recommendations. One of the concerns the Report raised about the provision of education was the fact that it did not prepare young people to be economically active (Mashile, 2000). The Report recommended that guidance aims to:

- help learners cope successfully with their learning and maturing problems at school;
- enable learners to develop coping skills such as social skills, learning skills, communication skills etc.;
- assist learners in the transition to adult status, and to give them knowledge of sex, marriage and family responsibilities;
- teach learners what career and educational opportunities they have and how to choose them in accordance with their needs and abilities; and
- teach learners how to deal competently with a fast and changing world.

(Mashile, 2000, p. 89).

While the policy provided sufficient scope to accommodate a variety of South African people and ensuring equity in the provision of educational opportunities, the push for separate but equal was seen by many as a problem or anomaly, as an endorsement of the *status quo*, which made the report a fundamentally conservative document (Wits Historical Papers, 2012). By excluding

the political and ideological factors from the definition of the problem, the report ignored the very basis students rejected the education system in 1976. According to Jansen (2001), the policy did not alter the fundamental principles of apartheid schooling, specifically of being ‘separate but equal’.

The National Education Policy Investigation (NEPI) report of 1992

This is the one document that posited that the systematic-preventive approach to the provision of guidance services to a community was better than the curative-individualistic approach which focused on the individual in the true psychological sense. Environmental factors and social dynamics must be considered and “emphasis placed upon interventions and the creation of healthy environments which prevent individual breakdown and foster the development of personal capacities to cope with life’s challenges” (Mashile 2000, p. 90). The inadequacies identified by both the De Lange Report and the NEPI Report prompted the government to investigate the provision of ESS and Special Needs in Education and Training in 1996. According to Odhav (2009), NEPI’s basic principles were non-racism, non-sexism, democracy, a unitary system and redress. Through it, numerous policies in education relating to its apartheid past were abandoned, and the social and political system became more accessible in all areas, with more rights for all. Both the NEPI and the National Commission of Higher Education (NCHE) of 1996 were crucial in forming post-apartheid education policy.

As with all the dazzle of post-apartheid education policies, there was considerable distance between policy (official statements of intent) and practice (experiences of teachers and learners)

(Sayed & Jansen, 2000), consequently, very little is changed on the ground. In this case, the policy did not change the state of school guidance and counselling and ultimately it was phased out of the system and replaced with Life Orientation. The NEPI also faced severe criticism from educational think-tanks for being idealistic and naïve (Jansen, 2000), as it did not consider the implementation and financial implications. Moyo (1993), on the other hand, blamed the report for over-simplification of complex issue, e.g., core curriculum, and for overlooking primary schooling.

White Paper on Education and Training of 1995

This was the first official policy document in education published by the ANC-led government which was formulated roughly a year after the birth of the democracy in South Africa. It profoundly shaped South African education into what it is today, especially the provision of psychological services. The White Paper recognised the massive inequalities in the provision of education and that transforming education meant redressing them by first bringing together the fragmented homeland departments into one Department of Education. “It reorganised the national education system by dismantling the old education bureaucracy through the establishment of new national and provincial education departments, and afforded them legislative competence and executive authority” (DoE, 1995b). Its directives included an integrated approach to education and training, an outcomes-based approach, lifelong learning, access to education and training for all, equity, redress, and transforming the legacies of the past (Mothata, 2000). The policy document “charted the government’s mandate to plan for the development of the education and training system for the benefit of the country as a whole and

all its people, fulfilling a vision to ‘open the doors of learning and culture to all’” (DoE, 1995b, p. 8).

Since education and training are basic human rights, the government expressed a firm commitment in this document to ensure that citizens enjoy these rights irrespective of their race, class, gender, creed or age so that they can make their full contribution to the society. According to the Department of Education (1995b, p. 8), “since countless South African families are fragmented by such factors as past unjust laws, migratory labour practices, and marital breakdown ... the state has an obligation to provide advice and counselling on education services by all practicable means, and render or support appropriate care and educational services for parents and young children within the community”. The document guaranteed equal access to education for all and put emphasis on redressing the educational inequalities among those sections of the population who were previously disadvantaged. The Department (DoE, 1995b, p. 10) also made a commitment “to counter the legacy of violence by promoting the values underlying the democratic process and the charter of fundamental rights, and by teaching values and skills for conflict management and conflict resolution, the importance of mediation, and the benefits of toleration and co-operation”.

The Interim Core Syllabus for Guidance (Grade 1 to Standard 10) of 1995

This syllabus was implemented in 1996, specifically to address the need for guidance and counselling services by the youth. The continued marginalisation of the subject, the fact that some guidance syllabi were prescriptive and not relevant to the needs and experiences of

learners, the unequal provision of guidance and counselling services, were some of the issues which prompted the re-conceptualization and the development of an entirely new Guidance curriculum. Its main aim was to ensure uniformity within one education system and serve as a basis for future bottom-up policy development. The following aims provided the basis for the implementation of the syllabus:

- *the holistic development of the learner;*
- *the provision of effective guidance and counselling at all levels in schools;*
- *the promotion of generic and transferable skills in the learner;*
- *to motivate learners to develop an interest in their studies and education in general and promote a culture of learning and work ethic; and,*
- *to promote the integration and relationship between all aspects of Guidance.*

(Department of Education, 1995a).

School guidance was unfortunately phased out in 1994 as a result of the rationalisation which meant that non-examinable subjects like physical education, library science, religious instruction suffered the same fate as they were considered a waste of scarce resources (Daniels, 2008). Financial constraints and a lack of trained counsellors posed a serious challenge. This was compounded by the fact that guidance was seen as elitist and benefiting a privileged few, hence it was seen as a preserve of White schools. Its demise led to the birth of the Revised National Curriculum Statement (RNCS) in 2001, which served as a catalyst the introduction of Life Orientation.

The NCESS/NCSNET Commission Report of 1996

According to Howell (2000), apartheid created massive inequalities in educational provision for learners with special needs. The government – to investigate the provision of ESS – appointed the National Committee for Education Support Services (NCESS) in 1996 which worked closely with the National Commission on Special Needs in Education and Training (NCSNET). Its task was to investigate and make recommendations on all aspects of ‘special needs’ and support services in education and training in South Africa. It was important that the Commission investigates “the development of education to ensure that the system becomes more responsive to the diverse needs of all learners” (Howell, 2000, p. 118; Mothata, 2000). According to the report “our education system excluded learners categorised as having special needs, which included learners with disabilities, those with learning difficulties, learners with ‘behavioural problems’, those considered ‘at risk’ due to various forms of economic and social deprivation and the gifted” (Howell, 2000, p. 119). According to Johnson and Lazarus (2003), “the report recommends a shift away from a predominantly individualistic approach (seeing the individual as the one with the problem and who needs to be changed) to a systemic approach to understanding and responding to learner difficulties and disabilities”. Hence, as Howell (2000, p. 119) states, “the report indicated that exclusion happened because the education system was unable to provide effectively and appropriately for the full range of learners’ diverse learning needs”. These factors were considered barriers to learning. Hence, the Report recommended changes in the organisation and provision of education, which required both the re-organisation and re-orientation of learning contexts and the development and support of a flexible curriculum. Amongst other things, the report recommended that there be an appropriate support system in

schools for learners who may require it, and that there is need for in-service training for teachers to equip them with skills to meet learners' needs. Issues of governance and funding are also important for this venture. The report asserted that "education for all people with disabilities is a fundamental right, which must be advanced and organised from a human rights and development approach to disability" (Howell, 2000, p. 125). People with disabilities, as the report stated, must have equal access to educational opportunities and this implies the availability of additional support mechanisms within an inclusive learning environment. Evidently, the report raised issues which are pertinent in the delivery of School Psychological Services, the most important being unlimited access to support services such as guidance and counselling. Following the Commission Report, the Integrated National Disability Strategy for South Africa (1997) and the Norms and standards (1998) policy documents laid a solid foundation for Psychological Services.

Revised National Curriculum Statement (RNCS)

This is a policy statement for teaching and learning in the Further Education and Training (FET) band. It gives expression to knowledge, skills and values worth learning. It is meant to ensure that learners acquire and apply knowledge and skills in ways that are meaningful to their own lives. This is a document which introduced Life Orientation as a learning area in schools to replace guidance and counselling. Rather than rely heavily on specialists (e.g., educational psychologists and psychiatrists) and making teachers feel inadequate to deal with learners problems and special needs, LO and IE involves collaboration between educators and specialists to enhance learners' well-being. According to the Department of Education (2011), "Life

Orientation is about the study of the self in relation to others and society and was focused on equipping learners with skills to solve problems, make informed choices and decisions and take appropriate actions to live meaningfully and successfully in a rapidly changing society”. Unlike its non-examinable predecessor Guidance, Life Orientation is an interdisciplinary subject which covers a range of topics embedded in “Sociology, Psychology, Political Science and Human Movement Science”. However, its NSC (National Senior Certificate) rating is not considered in tertiary institutions though one cannot pass matric without it. The subject (learning area) contains six topics, namely, development in society; social and environmental responsibility; democracy and human rights; careers and career choices; study skills, and physical education (Department of Education, 2011, p. 6).

The latest inclusion in the national policy arena which replaces the National Curriculum Statement (NCS) is the Curriculum and Assessment Policy Statement (CAPS), which like its predecessor, is based on the principles of social transformation, active and critical learning, high knowledge and skills, progression, human rights, inclusivity, social justice, and valuing of indigenous knowledge systems (Department of Basic Education, 2011). These principles align with and constitute the backbone of School Psychological Services. Importantly and contrary to popular opinion, Rooth, Seshoka, Steenkamp and Mahuluhulu (2012, p. vi) indicate that the Curriculum and Assessment Policy Statement (CAPS) “is not a new curriculum but a repackaged curriculum that is teacher-friendly and offers them support by bringing all the important information from the NCS into a single document”. It is intended to ease the administration burden on teachers and provide more clarity on what needed to be taught and tested. Amongst other things, the curriculum aims to produce learners that are able to identify and solve problems

and make decisions using critical and creative thinking (Department of Basic Education, 2011, p. 5). The curriculum in different grades (R-12) focuses on similar skills, knowledge and values with the content taught in lower grades serving as the foundation for the content taught in higher grades. This policy document changed the psycho-educational landscape in the sense that – apart from introducing LO as a school subject – it laid a foundation for the delivery of age-appropriate Life Skills in all grades. Although it provides guidance in the training of Life Orientation educators, its content, however, does not include basic counselling skills for educators to intervene when learners have problems.

Education White Paper 6 (EWP6)

This is a policy document which informs the delivery of inclusive education as a service. It “provides a framework for the development of an inclusive, holistic and integrated education and training system that is able to respond to diverse learning needs” (Departments of Health & Basic Education, 2012, p. 34). According to the Department of Education (2003b), the responsibility of the education system to develop and sustain learning is premised on the recognition that education is a fundamental right which extends equally to all learners, with or without disabilities. This means that the education system must create equal opportunities for effective learning by all learners by providing services to learners experiencing barriers to learning. Unlike in the past education system which disadvantaged poor youth, the Further Education and Training (FET) band must ensure that learners are supported to realise their expectations to enter Higher Education or the world of work. The *White Paper on Education and Training of 1995* and *Education White Paper 6 on Special needs Education: Building an*

Inclusive Education and Training System (2001) were meant to transform education to an extent that it benefits every learner despite their disabilities or learning barriers. Barriers to learning were conceptualised as factors which prevented learners from accessing educational provision (DoE, 2003). This document necessitated moving away from the medical model or an individual deficit approach which diagnosed certain learners as having special needs which required specialised teaching within specialised contexts. Teachers need to understand learning barriers and demonstrate an understanding that poverty, a content-based curriculum, the expectation that everyone learns in the same way, and learning in a language which is not one's home language need to be addressed through the way in which they teach, plan activities and assess learner performance. Apart from identifying barriers to learning, this policy recommended that all learners be given the necessary support and that schools must create conditions for learners to succeed. It is aimed at assisting schools to become inclusive and supportive, and is designed to assist schools to accommodate learners with diverse learning needs which include physical, emotional, social or psychological learning needs (Johnson & Lazarus, 2003). Based on the policy, the lack of School Psychological Services can be considered as a systematic barrier since it denies learners the opportunity to access services which promote their general well-being and enhance their mental health.

The policy documents discussed above made a huge contribution and changed the psychological landscape as well as shape Psychological Services into what they are today. This document discusses a variety of learning barriers (emotional, social and psychological issues) but does not assist educators by propose ways of handling them. Hopefully the new CAPS document which is currently being implemented will bring about positive changes that would improve on the quality

of services already delivered in the public domain and simultaneously suggest how they can influence learners' well-being, specifically how to handle personal issues which can potentially be a barrier to learning..

2.2.3 Defining School Psychological Services Programme

School Psychological Services are a relatively new concept in the South African educational landscape since they were implemented in 1995 with the introduction of the White paper on Education and Training and the Interim Core Syllabus of Guidance. Nevertheless, they are called by different nomenclatures, depending on the focus of the programme, the needs of the consumers, environmental constraints, societal values and the prevailing socio-economic contexts. They are administered from a variety of levels with many possible configurations. Though the names are different both locally and internationally the principles are the same. Notwithstanding the different names used the programmes share a common purpose, which is “to promote mental and physical wellness and facilitate learning of students by increasing their capacity to overcome academic, personal, and social problems that could hinder their attainment of educational success and a satisfying and productive life” (DoDea Manual 2946.4, 2001, p. 2). That is, they provide support to individual learners and focus on the prevention of physical, psychological, social and learning problems (NCSNET/NCESS Policy document, 1997). The names that are commonly used are mental health services, school health programme, school wellness programme, guidance and counselling services, psycho-social services, psycho-educational services, assessment services, special needs education services, counselling and psychological support services, responsive services, education support services (ESS), school

guidance services or Life Orientation programme. This includes all human and other resources that help to develop and support the education system so that it is responsive to the different needs of learners.

According to Kamphaus (1995), psychological services have been part of the American schooling experience for nearly a century and the nature of school psychology services have changed dramatically over the decades so that modern school psychology services differ significantly from their roots. For much of the 21st century school psychology services have emphasized assessment practice. School psychologists have primarily been involved in evaluating the needs of children in order to determine eligibility for special education and related services. Over the course of the past couple of decades, school psychology services have expanded to meet a broader array of needs, influencing the entire student body, not just children who are identified as having special needs (Kamphaus, 1995).

According to the Centre for Disease Control and Prevention and Health Promotion (CDC, 2009), a coordinated School Health Promotion Programme (CSHP) model consists of eight interactive components as identified in Figure 2.2 below. The eight components have to complement each other to promote the well-being of learners. They are critical means for improving both education performance and the well-being of young people. The key goals are increase health, knowledge, attitudes and skills; increase positive health behaviours and health outcomes; improve education outcomes and improve social outcomes. However, a difficulty or disturbance in one component affects the other services in the model.



Figure 2.2: A Coordinated School Health Promotion Programme (CDC, 2009, p. 2)

Schools therefore provide a critical facility in which many agencies might work together to maintain the well-being of young people, as a School Health Promotion Programme contains eight main components, i.e., family/community involvement, health education, physical education, health services, nutrition services, health promotion for staff, healthy school environment, and counselling, psychological and social services.

“Dating back to the very inception of contemporary school psychology in the United States, the *raison d’être* for the field has been to infuse the benefits of psychological theory, research, and the practice into the daily lives of children and the fabric of schooling” (Gutkin & Conoley, 1990). According to Gutkin and Conoley (1990), “schools provide an ideal setting for the delivery of Psychological Services”. This supposition is based on the belief that schools are

relatively predictable environments where children spend hundreds of hours during formative years interacting with significant adults and peers. As CDC (2009) put it, schools have direct contact with more than 95% of the national's young people aged 5-17 years, for about 6 hours a day. The processes of education and psychology want to see children develop cognitively, emotionally, and physically to their fullest potential. In sum, no other social system provides a more comprehensive opportunity to impact children and parents than the school.

School Psychological Services are therefore seen as actions, initiatives and programmes to help learners adjust to their environment and to grow into responsible adults. Although there are many such services with different nomenclatures in different countries and communities, they are all characterised by practices which are meant to effect changes in behaviour and assist the comprehensive development of individuals to adulthood. The services should be seen as intervention strategies in schools to bring about change in individual behaviour, promote health and discourage inappropriate lifestyles. These changes can either be brought about by classroom practices, direct or indirect contact with learners and their parents, and deliberate and planned teacher actions.

School Psychological or Psycho-Educational Services are an independent group of clinical, educational and legal services dedicated to assisting children and adolescents with special needs. It is dedicated to improving the educational well-being, academic potential, and the emotional health of all children, adolescents, and families (School Psychology Services, 2002). In the same vein, Elliot and Witt (1986) posit that schools provide an ideal setting for the delivery of Psychological Services to children from pre-school through to higher education solely for the

protection and promotion of mental health and facilitation of learning. It includes the following services which are meant to enhance learners' emotional health such as psychological and psycho-educational evaluation and assessment of children through the use of screening procedures, psychological and educational tests (particularly individual psychological tests of intellectual functioning, cognitive development, affective behaviour, and neuropsychological status), interviews, observation, and behaviour evaluations with explicit regard for the context and the setting in which professional judgements based on assessment, diagnosis and evaluations; interventions to facilitate the functioning of individuals or groups with concern for how schooling influences and is influenced by their cognitive, conative, affective and social development. Such interventions may include, but are not limited to, recommending, planning, and evaluating special education services, psycho-educational therapy, counselling, affective education programmes, and training programmes to improve coping skills; interventions to facilitate the educational services and child-care functions of school personnel, parents, and community agencies. They may also include in-service school personnel education programmes, parent education programmes, and parent counselling; consultation and collaboration with school personnel and/or parents concerning specific school-related problems of learners and students and the professional problems of staff.

They also include assistance with the planning of educational programmes from a psychological perspective; consultation of teachers and other school personnel to enhance their understanding of the needs of particular learners; modification of classroom instructional programmes to facilitate children's learning; and the creation, collection, organisation and provision of information from psychological research and theory to educate staff and parents. It also includes

programme development services to individual schools, to administrative systems, and to community agencies in such areas as needs assessment and evaluation of regular and specific education programmes; coordination, administration, and planning of specialized educational programmes; the generation, collection, organisation, and dissemination of information from psychological research and theory to educate staff and parents, and lastly, supervision of School Psychological Services (Elliot & Witt, 1986, p. 3). According to Strein *et al.*, (2003), although school psychology is conceptualised as primarily an indirect service specialty, conceptualizing school psychological services from a public health perspective will provide an even broader framework that can increase both the efficiency and efficacy of psychologists' work.

The Model for Comprehensive and Integrated School Psychological Services (*Figure 2.3*) serves as a guide to the organisation and delivery of School Psychological Services and simultaneously provides direction to school psychologists, school counsellors, students and other stakeholders of School Psychological Services (SPS) regarding excellence in professional practice.

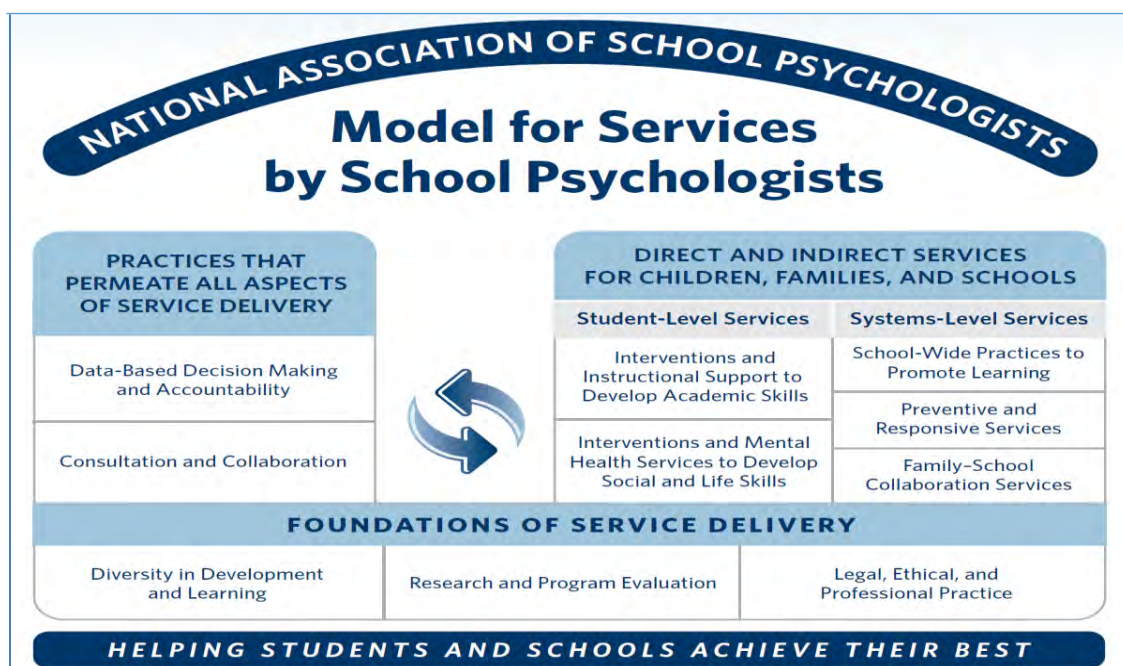


Figure 2.3: Model of Comprehensive and Integrated School Psychological Services (Adapted from National Association of School Psychologists, 2010, p. 4)

According to the NASP Model (2010, p. 4) “school psychologists and counsellors are uniquely qualified members of school teams that support teachers’ ability to teach and children’s ability to learn. They provide direct educational, behavioural, and mental health services for children and youth, as well as work with families, educators and other professionals to create supportive learning and social environments for all children”. They play a leading role in the delivery of School Psychological Services, with the support of school counsellors.

2.2.4 Delivery of School Psychological Services: International approach

Psychological Services are named according to their delivery approach i.e., how the services are offered in schools. There are two such approaches, namely, as direct and indirect services (*c.f. Figure 2.4 below*). “Direct services require direct contact between a psychologist and the client seeking help and include testing, counselling, and some forms of cognitive and behavioural treatments. They involve the psychologist directly providing an assessment of a student’s cognitive, academic, social-emotional and behavioural functioning” (Australian Psychological Society, 2013), and include implementation and evaluation of individual and group interventions that address students’ cognitive, social-emotional and behavioural problems. Indirect Psychological Services – which has begun to be used more frequently by psychologists – is about interacting with other professionals, and lay persons such as parents, who consult with clients. The school psychologist indirectly meets the needs of students by advising or consulting with teachers, parents and other participants. Examples of indirect services in this case would be consultation, referrals, in-service and pre-service training, research and parent training. The

diagram below provides an illustration of the two modes of delivery for School Psychological Services, namely direct and indirect services:



<div style="display: flex; align-items: center; justify-content: center;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg); text-align: center;">Direct Influence on Child</div> <div style="margin: 0 10px;">   </div> <div style="writing-mode: vertical-rl; transform: rotate(180deg); text-align: center;">Indirect Influence on Child</div> </div>	Counselling/Therapy – Psychologist works with individual child or small groups of children to enhance adjustment or development
	Psycho-educational Assessment – Psychologist uses formal and informal data collection devices with individual children to obtain information needed for decisions about screening, classification, placement, and interventions
	Consultative Child Study – Psychologist works with parents or teachers to enhance adjustment or development of child
	In-service – Psychologist works to increase knowledge or skills or to change attitudes of groups of school personnel
	Research – Psychologist systematically gathers data to aid in decision making regarding groups of children and their educational programmes

FIGURE 2.4: Influences of School Psychological Services on children. From “Roles and Status of School Psychology” by V. Monroe. In G.D. Phye and D.J. Reschly (Eds). *School Psychology: Perspectives and Issues* (pp. 25-47). New York: Academic Press. Copyright 1979. Reprinted by permission.

What the diagram represents are different psychological services and locates counselling as a direct service while research is considered as an indirect service. Consultation is unique to the indirect method of delivery. It is a process for helping a client through a third party, or a process of helping a system improve its services to its clients (Jackson, 1986). It includes in-service training for educators, parent training, curriculum advisement, and some behavioural interventions (Elliot & Witt, 1986). The purpose of consultation is to enhance the problem-solving capacity of a consultee by providing new knowledge, new skills, a greater sense of self-efficacy and a more perfectly developed level of objectivity in them (Conoley & Conoley, 1990). School psychologists can consult with teachers either to provide advice and information about general mental health and other psychological issues affecting students, or determine the effectiveness of student programmes, strategies and techniques, psychological intervention and prevention approaches (Australian Psychological Society, 2013). Whatever approach the school

adopts, Elliot and Witt (1986) caution that an exclusive reliance on either direct or indirect service techniques is indicative of an incomplete service model and should be avoided as certain cases demand the direct attention and skills of a psychologist whereas others can be handled effectively by teachers, parents, or even peers.

Earlier on Elliot and Witt (1986, pp. 20-22) developed a generic model for the delivery of Psychological Services which has instructional value and which can be modified upon implementation to suit the needs of a particular school district. The six assumptions, which still hold true today, are:

- *Behaviour and learning problems of children are functionally related to the setting in which they are manifest.* This assumption does not mean that educational settings necessarily cause the psycho-educational problems children manifest in such settings; however it does suggest that the relationship may be primarily casual or that the behaviour is triggered by a factor(s) in the school environment. Thus, it is necessary to evaluate an educational environment, as well as a particular child.
- *A primary goal of psycho-educational assessment is to determine what a child does and does not know, and how the child learns best so that successful intervention can be designed.* This assumption stems logically from the required end-product of assessment; in other words, what and how information is a prerequisite to the development of a valid individual education plan. Such a supposition is consistent with a thorough consultative problem-solving and skills-training approach to assessment.
- *Techniques for individual diagnosis and intervention need to be supplemented with techniques for diagnosis and intervention in specific school settings and in the school as*

a social system. Generally, it is not sufficient to intervene only at the level of an individual student. In order to enhance the probability of meaningful and long-term behaviour change, it is necessary to intervene on a broader level.

- *The greater the proximity in place and time of Psychological Services to educational settings, the greater the utilization of these services.* This assumption is based on the premise that problem-solving communication among professionals working with an individual will be enhanced if they work in the same environment. In addition, psychologists who work in and are part of a particular ecology (e.g., school) will be more knowledgeable of the resources and constraints of the system. In this situation, proximity does not breed contempt; rather, proximity breeds accessibility.
- *Psychological Services should be directed toward the development and utilisation of resources indigenous to schools.* The essence of a consultation-oriented service system is for consultants to work indirectly with children through a consultee (i.e., teachers and parents), and thus enhance the consultee's ability to solve future problems. By focusing on indigenous resources, we increase the likelihood of designing interventions that are socially valid and that can realistically be implemented in a classroom or other settings.
- *Psycho-educational interventions require the on-going attention of the person(s) who implement them because over time a child's response to a particular intervention will change.* If we had to choose one fatal flaw of education (relative to business or other fields), it is that it fails to evaluate and to periodically follow up on suggested interventions with children. Such follow-ups allow for refinement of a particular intervention and to provide feedback concerning their effectiveness.

The generic model above encapsulates what is necessary for the effective implementation of School Psychological Services for the benefit of learners. According to Gutkin and Conoley (1990), although there are minor discrepancies among the results, typical practicing school psychologists appear to spend approximately 60% of their time in activities related to assessment, 25% on consultation, 10% on direct intervention, 3% on in-service, and 2% on research/programme evaluation. Of these five functions, four can be characterised along the direct-indirect service delivery continuum with little difficulty. Clearly the consultation, in-service, and research/programme evaluation activities should be viewed as indirect services. The remedial interventions provided by school psychologists (e.g. counselling and psychotherapy) are best characterised as direct services. Categorising the assessment functions of school psychologists is problematic. Although school psychologists have a great deal of direct contact with learners while they perform their assessment duties, the assessment role is best characterised as an indirect service. Gutkin and Conoley (1990) made two essential points in support of the above analysis; the first being the fact that although assessment activities lead to services for children, in and of themselves they are not services for children. Secondly, as indicated in the generic model, assessment activities are intermediate steps in a total service delivery model. Assessment activities are best characterised as a means to an end rather than as an end in and of themselves. A procedural flowchart (*Appendix K*) illustrates a generic model of school Psychological Service delivery, a 15-step-by-step sequence of Psychological Services for referred learners.

What are the components of School Psychological Services? How are they offered in schools? And, of what benefit are they to learners?

2.2.5 Components of School Psychological Services in South Africa

Elliot and Witt (1986) posited the following as either direct or indirect components/elements of the School Psychological Services in South Africa, which I have grouped under three broad categories, i.e., school curriculum and learning areas, learner wellness programmes, and learner support services:

2.2.5.1 School curriculum

The school curriculum consists of particular learning areas which are offered as vital components of School Psychological Services. Whereas in other countries, they are offered as separate services, in South Africa, they are integrated into the LO curriculum. Under the umbrella of Life Orientation, the following topics are covered, Health Education, Physical Education, Career Education, Sexuality Education and HIV and AIDS Education.

2.2.5.1.1 School guidance and counselling

A discussion of School Psychological Services in South Africa would be illogical without a review of School Guidance and Counselling, which is considered the basic ingredient and oldest form of psychological services implemented in schools nationally. According to Ferron (1990),

the concept of Guidance and Counselling services – which evolved from a pastoral programme – is comparatively-speaking still very novel in Southern Africa. Education authorities in the Southern African region have only recently realized in a vague way that Guidance and Counselling should form an integral part of the education system of the country. According to Euvrard (1996) and Marais (1988), “guidance and counselling services in South Africa have had a chequered history, and while White, Coloured, and Indian education departments had developed structures and programmes over the past 20 to 40 years, guidance was only introduced as a separate non-examinable school subject in the Black junior and senior secondary schools in 1981”.

Mashile (2000) contends that education support services (ESS) – which includes Guidance and Counselling – was not adequately catered for in the past. Before 1994 ESS (*Appendix P*) were plagued by the following inadequacies:

- ESS was viewed as an add-on to the curriculum, hence services were marginalized resulting in a lack of status and resource allocation;
- The governance of ESS was fragmented. Guidance and Counselling, and Specialised education were administered by the Department of Education, School health by the Department of Health. Each racial group had its own ESS provision. Consequently, there was a lack of administrative and professional coordination between the services provided;
- There was lack of national clarity and focus on the nature and orientation of services;
- Parents and learners seldom had a choice between mainstream and specialized education, with the result that decision-making about learners’ specialized needs and services was centralized and non-participatory;

- There were inequalities and inconsistencies, particularly between the different racially segregated departments. For Whites, ESS was provided for in clinics available through district offices. While ESS for Indians and Coloureds was also provided for in district clinics, a far less developed service existed for them than for Whites. Africans received minimal, if any, access to services. NGO's were largely responsible for providing services to Africans (Blacks), and
- Finally, where ESS existed, it was conceptualized and operated predominantly in terms of cure rather than prevention. Services were geared toward towards learners with particular academic, psychological, social or physical needs or problems, rather than towards health promotion and optimal social, psychological and academic development of all (Mashile, 2000, pp. 88-89).

A review of the guidance literature in South Africa reveals that not much has been written about the development of guidance programmes, their implementation and evaluation. Nevertheless, Guidance and Counselling in South Africa has undergone transformation from the beginning of the 21st century to today. Schools generally had a specialist Guidance teacher with a psychology background, who besides teaching the prescribed syllabus to various grades also had a crucial role of counselling learners with problems of a psychology nature. The services were grounded in psychometric assessments as they consisted mainly of aptitude and interest testing administered by school psychologists in standards five, eight and ten. Nicholas and Cooper (1990), say that

“In support for the apartheid system, it becomes the responsibility of the psychologist, and the role of guidance counsellor, to ensure that these expectations are achieved. While school guidance programmes for white learners are judged to be an important means of the South African Government's stated objectives for guidance programmes for White students was moulding the conscience according to the South African hierarchy of values which should inculcate the aspiration of the White population to

guard its identity. The primary aim of guidance services in white schools was to ensure unquestioning conformity to and inculcating societal values, ...guidance services for black students have been appallingly neglected, a reflection perhaps of White authorities' ambivalence at offering adequate education and guidance to those whom until quite recently, were assumed to be suitable only for menial jobs" (Nicholas & Cooper, 1990, p. 9)

According to Nicholas and Cooper (1990), guidance which in Black schools consisted of a superficial testing service used for statistical and research purposes rather than as guidance for the students, was introduced as an important educational component in black school after the 1976 riots. As Macleod (2009) puts it, social control was its main purpose as explicit in the provision, and traits such as honesty and responsibility were to be developed whilst values such as time consciousness, dependability, willingness, thoroughness and obedience were stressed. Instead of assisting individuals to make choices in a manner that helps them to create their own identities, guidance in South African black schools was aimed at manipulation. "Apartheid enforced schools to teach Black children to consider themselves as occupying an inferior place in society, and White children were taught that they were superior and Africans 'primitive and barbaric'" (Chuenyane, 1990, p. 25). Lockhat and Van Niekerk (2000) say that "because of Bantu education, schools became pits of hopelessness and despair", and consequently in the 1980s, they became sites of violence and conflict. According to Stead and Watson (1999) the purpose of native education was to make both African and White children believe that they, by nature, have different destinies, hence the curriculum for native education was to retard their intellectual development. The fact that guidance was used by the apartheid government as a tool of oppression – to support and perpetuate the interests of the state through a fundamentally normative function of 'guiding' students into their roles as future citizens, roles that were clearly

racialised (Macleod, 2009) – led to its stigmatisation. Deliberately, guidance was under-resourced and through retrenchments, guidance teachers were forced to leave as their expertise was in a non-examinable subject (Rooth, 2005). Hence, “black learners viewed guidance with suspicion as it was introduced at a time when the government was using whatever means were at its disposal to control the political unrest in the township schools” (Euvrard, 1996).

According to the National Education Policy Investigation of 1992 (p. 20), School Guidance was designed to bring learners “into contact with the real world in such a way that they are taught life-skills and survival techniques which enable them to direct themselves completely within the educational, personal and social spheres and the world of work”. It was introduced in secondary schools to meet the needs of adolescents by focusing on improving academic performance, and implementing services to help learners solve their behavioural and social problems, and addressing their career needs (Mbuyazi, 2002; Gladding, 2000). However, School Guidance was compromised owing to the limited number of trained personnel and its allocation to teachers whose timetables needed a few extra periods filled. This led to guidance being subsumed by examination subjects that were perceived as more important and as having greater status. It is difficult to predict the future of Guidance and Counselling, but education will have to be seen to be meeting the needs of youth, thereby reducing their levels of stress, anxiety and frustration. It is certain that Guidance and Counselling will become even more necessary in future.

According to the core syllabus for Guidance (Department of Education, 1995a), the inclusion of Guidance and Counselling in the school curricula arose as a result of the complexities of a rapidly changing contemporary South Africa which amongst other things resulted in formal

education being called upon increasingly to deal with issues which were previously considered to be within the domain or responsibility of the family. A disintegration of family and community life, challenging of many traditional values, and a growing need for specialist knowledge in many new areas led to the birth of Guidance and Counselling in our schools. Another contributory factor was the fact that parents, especially mothers, were taking up paid employment and working outside homes, creating a situation where children had nobody to look after them. Schools therefore were charged with the responsibility which otherwise belonged to the families or homes (Department of Education, 1995a, p. 1).

The White Paper on Education and Training of 1995 (Mothata, 2000), was focused on an integrated approach to education and training, an outcomes-based approach, lifelong learning, access to education and training for all, equity, redress and transforming the legacies of the past. All these have implications for School Psychological Services. However, it is the South African Schools Act 84 of 1996 which made the mandate more explicit to provide a uniform system for the organization, governance and funding of schools, establish minimum and uniform norms and standards for the provision of education at schools, and ensure the provision of quality education across the school system (Mda & Mothata, 2000, p. 10). This presupposes the equal provision of Psychological Services (including equal provision of Guidance and Counselling services) in public schools and the establishment of School Governing Bodies (SGB's) as a model of school-community partnership, aimed at addressing learners' behavioural problems in a democratic manner and ensure academic success and overall well-being of learners. Current changes in the education system are meant to meet this ideal. However, according to Barry Streek (Mail & Guardian, January 11-17, 2002), inequalities of the past still exist in our education system,

producing winners and losers. “The reality is that after nearly fourteen years of democratic rule, gross inequalities – largely racially and poverty-based – continue to exist in the public school system”. White schools have all the resources and Black schools have meagre resources to meet the basic needs of learners.

Guidance and Counselling and career or vocational guidance were subjects in some schools prior to curriculum transformation and these aspects have been absorbed in altered configurations into Life Orientation (Macleod, 2009; Stead & Watson 2006, Mbuyazi, 2002). The NCESS/NCSNET Commission Report of 1977 had recommended that the subject ‘guidance’ be replaced with Life Orientation (including Life Skills), which should be offered at all levels, and that guidance teachers be reoriented to offer the new learning area. The commission also postulated an intersectoral approach be used in the development and provision of life skills education.

The RNCS is the one document that can be credited with the introduction of Life Orientation as a learning area in South African schools. Its introduction sounded the death-knell on School Guidance and Counselling and signalled the birth of Life Orientation as a compulsory school subject or learning area. According to Rooth (2005), Life Orientation could so readily contain the vestiges of past guidance’s value-laden curricula and, since it was the vehicle for some of the nefarious policies and practices of the pre-democratic South Africa, its inclusion in Life Orientation needs to be circumspect, informed, critical and well-considered.

Gibson and Mitchell (1990) maintain that guidance services should be aimed at all school levels, are primarily preventive in nature and should include the following services: learner inventory

service, information service, counselling service, placement service, and follow-up and evaluation service. Gibson and Mitchell (1990) emphasize the importance of Guidance and Counselling programmes when they say that these programmes can contribute more effectively when

“School Guidance and Counselling programmes are designed to serve the developmental and adjustment needs of all youth, and learner guidance is viewed as a process that is continuous throughout the child’s formal education” (Gibson and Mitchell, 1990, p. 37)

Currently, Psychological Services (including guidance services) in South African schools is the prime responsibility of educational psychologists based in district offices who visit schools upon invitation by school principals and/or Life Orientation educators, especially in the event of a problem (see *Appendix J*). The sources referred to above discuss Psychological Services (*viz.* Guidance and Counselling) without necessarily looking at and addressing the challenges affecting the delivery of these essential services in South African secondary schools, both urban and rural.

2.2.5.1.2 Life Orientation / Life skills education

Life Orientation as a facet or feature of School Psychological Services came into being through the Education Renewal Strategy (ERS) prior to the 1994 elections. Curriculum transformation altered guidance and counselling into a learning area called Life Orientation which was meant to address the needs and risks associated with adolescent development (Rooth, 2005). The Department of Education decided on the nomenclature because it is inclusive of Life Skills

Education, School Guidance and other aspects of the curriculum such as Religious Education, Health Education, Physical Education, Sexuality Education, Career or Vocational Education and Citizenship Education. Each of the constituents plays an important role in promoting learners' wellbeing and ensuring their holistic development.

Life Orientation, as the Department of Education (2003b), states, "is the study of the self in relation to others and to society. It applies a holistic approach to learner development as it is concerned with the personal, social, intellectual, emotional, spiritual, motor and physical growth and development of learners, and the way in which these dimensions are interrelated and expressed in life. The focus is the development of self-in-society, and this encourages the development of balanced and confident learners who will contribute to a just and democratic society, a productive economy, and an improved quality of life for all" (Department of Education 2003b, p. 9). Life Orientation is therefore a Learning Area meant to guide and prepare learners for life. It has an interdisciplinary focus as" it draws on and integrates knowledge, values, skills, and processes embedded in disciplines such as Sociology, Psychology, Political Science, Human Movement Science, Labour Studies and Industrial Studies". That notwithstanding, Life Orientation is mainly a psycho-educational service meant mainly to equip learners with skills to handle life's challenges. Rooth (2005) indicates that Life Orientation, in effect, aids all learning areas in achieving their outcomes: it enables learners to promote their and others' health, develop their potential, equip themselves with Life Skills, and be informed decision makers who are goal directed and who willingly interact in the community for the benefit of all.

According to the Department of Education (2003b), “Life Orientation equips learners to engage on personal, psychological, neuron-cognitive, motor, physical, moral, spiritual, cultural, socio-economic and constitutional levels, to respond positively to the demands of the world, to assume responsibilities, and to make the most of life’s opportunities”. Through Life Orientation “learners would know how to exercise their constitutional rights and responsibilities, to respect the rights of others, and to value diversity, health and well-being. Life Orientation promotes knowledge, values, attitudes and skills that prepare learners to respond effectively to the challenges that confront them as well as the challenges they will have to deal with as adults and to play a meaningful role in society and the economy”.

Life Orientation as offered at the Further Education and Training level (high schools) focuses on the diversity of learners as human beings in their totality and: requires learners to identify and confront challenges using acquired knowledge, values, skills, and strategies; prepares learners to be successful by helping them to study effectively and make informed decisions about subject choices, careers, and additional and higher education opportunities; helps learners to exercise their rights, as well as their civic and social responsibilities, in order to contribute to society “while respecting the rights of others; fosters self-awareness, social competencies and the achievement of a balanced and healthy lifestyle; addresses changes during puberty and adolescence, responsible sexual behaviour, risky adolescent behaviour and attitudes regarding a range of issues including substance abuse, road use, dietary behaviour and personal safety; help learners to make informed decisions about and to nurture personal, community and environmental health; and exposes learners to and encourages them to participate in recreational and physical activities to enhance well-being” (Department of Education, 2003, p. 10).

According to the Department of Education (2003b), “personal well-being is central to fulfilling one’s potential; it enables learners to engage effectively in interpersonal relationships, community life and society”. Many personal and social problems associated with lifestyle choices persist in the FET phase. Personal well-being, as one area of Life Orientation, focuses on self-concept, emotional literacy, social competency and Life Skills. It deals with the realities of peer pressure, factors influencing quality of life, and the dynamics of relationships, as well as preparing learners for a variety of roles (for example, being an employee, leader or a parent). It addresses issues related to the prevention of substance abuse, lifestyle diseases, sexuality, teenage pregnancy and sexually-transmitted infections, including HIV and AIDS. As Theron and Dalzell (2006) point out, Life Orientation can provide the opportunity for young people to talk about their experiences of, and the fears and myths they harbour about, the challenges of adolescence, and also deals with issues such as Human Rights, gender issues, the environment and all forms of violence and abuse. However, Life Orientation does not include counselling services, where learners get to share confidential information with a counsellor.

On the other hand, Life Skills, according to Maree and Ebersöhn (2002, p. 82), is defined as “education designed to facilitate the practice and reinforcement of psychosocial skills in a culturally and developmentally appropriate way. It contributes to the promotion of personal and social development, the prevention of health and social problems, and the protection of human rights”. They (*ibid*) define Life Skills as “abilities for adaptive and positive behaviour, that enables individuals to deal effectively with the demands and challenges of everyday life...(they) are those abilities that help to promote mental well-being and confidence in young people as they

face the realities of life”. Rooth (2003) posits that Life Skills as the skills necessary for successful living and learning, enabling people to participate fully in community development and holistic environmental living. Theron and Dalzell (2006, p. 398), on the other hand, define life skills as “non-academic abilities, knowledge, attitudes, and behaviours necessary for successful living and learning and enhance the quality of life and prevent dysfunctional behaviour”.

According to Donald, Lazarus and Lolwana (2002, p.156), life skills promote psychosocial competence (including physical, emotional, and social well-being) and enhance a person’s coping resources and confidence (Donald *et al.*, 2002). For Olivier, Greyling and Venter (1997) Life Skills refer to “the life coping skills consonant with the developmental tasks of the basic human developmental processes, namely those skills necessary to perform the tasks for a given age and sex in the different areas of human development”. They are the ability to cope with important tasks in times of change; the skills to live, to coexist and to survive. Olivier *et al.*, (1997, p. 25) aptly sum up the importance of Life Skills thus: *we cannot always build the future for the youth, but we can build the youth for the future*. From the aforementioned clarifications, it may be concluded that Life Skills relate to all skills that enable people to adequately handle their life situations and to lead meaningful lives.

Similar to Life Orientation, Life Skills involves personally responsible choices, that is, taking responsibility for one’s own well-being and fulfilment, and assuming rather than avoiding responsibilities. Inadequate Life Skills may be reflected in and may lead to psychological distress. Maree and Ebersöhn (2002, p. 83) contend that Life Skills are not static but processes

that entail sequences of effective choices and involves three dimensions, namely: *attitudes*, the motivational dimension or the ‘wanting to do it’ dimension, which means that if we have the appropriate attitudes to any life skill, we will take responsibility for acquiring, maintaining, using and developing it; *knowledge*, this is the ‘how to do it’ dimension of a lifeskill which involves knowledge regarding the correct choices to make, and *skill*, which is the application of attitudes and knowledge to practice, the ‘actually doing it’ dimension of a lifeskill (Maree and Ebersöhn, 2002, p. 83).

Life skills are abilities for adaptive and positive behaviour that enable individuals to deal effectively with the demands and challenges of everyday life (Programme on Mental Health, 1997). The Programme on Mental Health (1997) maintains that “although the nature and definition of life skills differ across cultures and settings, there is a core set of skills which are at the heart of skills-based initiatives for the promotion of the health and well-being of children and adolescents. They are: decision making; problem solving; creative thinking; critical thinking; effective communication; interpersonal relationship skills; self-awareness; empathy; coping with emotions, and coping with stress”. A programme of School Psychological Services should ensure that adolescent learners acquire these skills.

It is apparent from the discussion above that Life Orientation and Life Skills are closely linked. Viewed closely, both of them enhance the psychological well-being of learners. The Department of Education, with good intentions, introduced Life Orientation to compensate for the lack of Guidance and Counselling services in schools. The plan was to use the learning area (i.e. school subject) to empower learners so they would be able to deal with problems or issues affecting

them. The pertinent question is whether adolescents are equipped with Life Skills to successfully handle their life situations and make meaningful contributions to society in the midst of the demands made on them by the rapidly changing South African society. If learners are failing to deal with challenges and socio-economic issues confronting them on their own, who do they turn to if educators feel ill-equipped to intervene? The main challenge with Life Orientation is that it does not provide a platform for learners to confide in someone about personal challenges or problems they are confronted and grappling with. Also, the educator who offers it might not be a qualified school counsellor, but anyone with a low teaching load.

2.2.5.1.3 Health education

Health education is an important aspect of life skills education and lies at the core of health promoting schools. Rooth (2005) maintains that health education is taught either as a derivative of life skills education, as life skills education or in conjunction with life skills education. There is a reciprocal relationship between the two, as one cannot be taught without the other. Hence, health education is referred to as skills-based health education and, undoubtedly, an important part of School Psychological Services. According to Maree and Ebersöhn (2002), health is viewed as “the state of complete physical, mental and social well-being and not merely the absence of disease. In more recent years this view has been modified to include the ability to lead a socially and economically productive life”. Critics of the above definition argue that “health cannot be defined as a state but must be seen as a process of continuous adjustment to the changing demands of living and of the changing meanings we give to life. The definition is therefore considered by many as an idealistic goal rather than a realistic proposition” (Maree &

Ebersöhn, 2002). However, '*mens sana in corpore sano*' (Juvenal, 2008) translated means 'a healthy mind in a healthy body', can be seen as the purpose of Health Education.

Ross and Deverell (2004, p. 13), define health as "a positive state of physical, mental and social well-being, not merely the absence of disease or injury, that varies over time along a continuum" (p.13). According to them (*ibid*, p. 5), "health psychology is devoted to understanding psychology of how people stay healthy, why they become ill, and how they respond when they do get ill". Ross and Deverell (*ibid*) recommend that with increasing costs of medical care, emphasis should shift from care to disease prevention and consequently health promotion should be about health and maintenance of a healthy lifestyle rather than disease and treatment.

Mashile (2000) asserts that a satisfactory state of health contributes to the academic achievement of all learners. Learners need to be healthy in totality, that is, physically, psychologically, spiritually and socially. To avoid possible health problems the provision of health education has to be an integral part of the school curriculum, particularly at the General Education and Training (GET) phase. Poor education regarding personal hygiene, inadequate housing, overcrowding and poor sanitation predisposes school learners to ill-health which, in some cases, degenerates into disability. Due to the failure of communities (and parents) to create conducive environments that support learners' state of good health, the school must also address learners' health. Failure to provide for this could result in outbreaks of diseases, a high rate of absenteeism, and so forth. Poverty means that the basic needs such as nutrition cannot be met and good nutrition is important for the intellectual development of learners and critical for preventing diseases (World Bank, 2003). As Colby *et al.*, (2000) put it, adequate nutrition is critical for normal brain

development in early years, and early detection and intervention for disabilities can give children the best chances for healthy development.

To facilitate the above, Mashile (2000, p. 99) posits that:

“the school health programme should endeavour to protect, promote and improve the health status of learners, and to prevent health problems. The planning, implementation and evaluation of a school health programme is a complex undertaking and, as such, no individual in a school setting is able to adequately implement this single-handedly”.

Hence, Mashile (2000) recommended a team approach to tackle this. According to Mashile (2000, p. 100), personnel involved in the school health programme should be trained to do one or more of the following: incorporate the major foundation areas (e.g. guidance and counselling) into school health programme; assist in all activities designed to provide a healthful school environment; identify potential health problems of learners; conduct or assist in health appraisal of learners; counsel learners and parents concerning health-related problems; utilise a sound health referral system, including participation in follow-ups; assist in all activities designed to control communicable diseases in the school setting; assist in all activities designed to improve the health status of handicapped learners; provide emergency care when needed for both learners and school personnel; and implement comprehensive health education at all grade levels (Mashile, 2000). However, the scenario presented here is an ideal one, with many schools battling to employ personnel and implement school health programmes, especially schools in the townships and rural areas.

According to the NCESS/NCSNET Commission Report of 1996, each learning centre should have a Centre of Learning Based Team (CLBT). The CLBT, as Mashile (2000) states, should be responsible for the planning, implementation and evaluation of the school health programme. A school nurse should be designated as the manager of the school health programme, if not available, a teacher should be assigned to be the health educator. The primary objective of health education is to ensure that every learner benefits from learning about disease prevention and health promotion. Consequently, the responsibilities of the school nurse would include: assessment, screening, health advisor, communicable disease control, referral agent, removal of barriers and promotion of environmental health.

According to Donald *et al.*, (2002, p. 26) health promotion includes promoting all those dimensions of development that together contribute to positive, competent, confident persons. It therefore includes all of the physical, cognitive, emotional, social, moral, and spiritual aspects of development. Health promotion is by definition a holistic concept and consequently it does not, for instance, separate areas such as physical, social, and mental health. If one area is neglected it will inevitably affect the others. Scholastic well-being cannot be achieved without physical, social, and emotional well-being (Donald *et al.*, 2002). The social interdependence of mental health diagram (*Appendix O*) depicts how different aspects of an individual are intertwined and the role of the school and community health institutions in ensuring that youth access appropriate mental health care.

There is no Department of Education policy on Health Education yet, but it is commendable that they have included it in the Life Orientation curriculum statement (Department of Education,

2003) as personal well-being, recreation and physical activity, covering issues such as lifestyle, self-concept, relationships, diseases, stress management, nutrition, recreational and leisure time activities to mention a few. Life Orientation acknowledges that participation in recreation and physical activities enhances health, individuals' self-esteem, the duration and quality of life.

2.2.5.1.4 Physical education

Learners' physical development is viewed as core to their holistic development which augments their social and personal development. Physical health impacts on learners' psychological well-being, which is the focus of School Psychological Services. Rooth (2005, p.104), defines physical education as "an educational process which promotes the holistic human development of social, cognitive, affective, normative aspects through the medium of selected activities to realise this outcome. Physical education significantly contributes to learners' well-being; therefore, it is an instructional priority and an integral part of learners' educational experience. It teaches learners how their bodies move and how to perform a variety of physical activities". Its aim is to encourage learners to live active and healthy lifestyles. All learners need thorough knowledge of the benefits of healthy living. Van Deventer (2002) who clarified the difference between physical education (PE) and school sport as follows: PE is part of the formal education curriculum, while school sport is seen as an optional extra-curricular activity. Sport, however, relies on the knowledge, skills, values and attitudes that learners develop in physical education (Van Deventer, 2002).

Participation in physical education has been found to impact the way adolescents think, feel, move and relate to others creating space to explore their motor skills, social skills, cognitive skills, self-concept and lifestyle change. This has a positive impact on learners' self-esteem, and, as Shehu and Mokgathi (2008) put it, "affirmative attitudes and beliefs about health and self, increase the likelihood that adolescents will behave wisely in high-risk situations and thrive under adverse conditions such as poverty, bereavement, and other stressful life events". According to the California State Board of Education (2005), "high quality physical education contributes to students becoming confident, independent, self-controlled, and resilient; develop positive social skills; set and strive for personal, achievable goals; learn to assume leadership; cooperate with others; accept responsibility for their own behaviour; and, ultimately, improve their academic performance". However, due to the health risks of sedentary lifestyles becoming increasingly endemic, physical education is core to health and the development of well-being (Rooth, 2005). It inspires learners to live active and healthy lifestyles.

Physical education in South Africa was one of the non-examinable subjects in the past before curriculum transformation, in the same category as guidance. It was not taught at many schools and, with retrenchments, many physical education teachers were lost to schools (Van Deventer, 2004). The rationalisation of personnel introduced by the Department of Education in the mid-1990s (Maree & Ebersöhn, 1998) compelled school governing bodies (SGB's) to eliminate physical education as a non-examinable school subject. Van Deventer (2008) has made the following recommendations concerning the implementation of physical education in schools:

"The DoE should address the state and status of LO in the GET band. The health of our youth and our performance in sport depend on it since physical education can be a "breeding ground" for talent identification; The DoE should initiate in-service

education and training (INSET) as well as pre-service education and training (PRESET) programmes; Higher education institutions should become more involved in INSET as part of their community interaction strategy, and for real impact, more time should be allocated to physical education lessons and activities per week” (Van Deventer, 2008).

As Van Deventer (2008) notes, it cannot be business as usual anymore. Lack of physical activities and poor nutritional habits are behind the escalation of obesity among children. There is a deep-rooted need for physical education for learners. Hence, the Revised National Curriculum Statement has physical development and movement as one of the learning outcomes of Life Orientation (Department of Health, 2001). Physical Education is linked to Learning Outcome 4 of the RNCS, namely, Physical Development and Movement (Department of Education, 2002b). It is an essential component of the Life Orientation curriculum, an important aspect of adolescent development which enhances their well-being.

2.2.5.1.5 Career education

Traditionally, career education has been seen as career guidance, an essential component of School Psychological Services. Career education programmes – neglected for a long time – were previously part of School Guidance – as Vocational Guidance. It has now been integrated into Life Orientation as focus area: Orientation to the world of work (Department of Education, 2002a). Career education implies a far wider range of activities than career guidance, the latter being restricted to individual career decision making, information giving and advising. Gibson and Mitchell (2003) define career education as “...planned for educational experiences that facilitate a person’s career development and preparation for the world of work”. For Career

education to be relevant it should be responsive to the individuals for whom it is designed, their life experiences and their contexts.

Akhurst and Mkhize (2009, p. 141) note “four major thrusts of careers work in secondary schools in the United Kingdom, namely: fostering knowledge about courses in tertiary institutions; providing information on possible occupations, and lifestyles associated with them; developing self-awareness through understanding individual abilities, interests, ideals and values and, practicing decision-making and developing Life Skills for coping with transitions”.

Since the inception of school guidance, career guidance has been a facet of the guidance programme. Amongst other things, it was meant to bring learners in contact with the world of work. However, due to the marginal role school guidance plays in the education of learners, often with meagre resources and under-qualified staff, there was no career education in many South African schools. As Akhurst and Mkhize (2006) state, a further constraint on career education relates to the limitations imposed by making learning area choices at the end of Grade 9, when many learners are still at the beginning of the career exploration phase and subjects might be chosen for reasons that are not informed by future career planning. They further contend that the curriculum available in many black schools does not include important educational streams, for example, commerce and science, which is a disadvantage. About 90% of learners in black secondary schools have serious career planning problems and have pleaded vociferously for career education in their schools (Akhurst & Mkhize, 2006). These learners, according to Akhurst and Mkhize, (2006) have: limited exposure to the world of work; little or

no access to career education services; no knowledge of large reputable tertiary institutions; and a narrow range of social contacts.

Vocational guidance puts emphasis on relevance in what children learn, and part of this relevance is in developing work-related goals. According to Donald *et al.* (2002, p.229) it is about balancing idealism with realism, with students building up images of themselves in careers or positions, setting realistic goals and how they would achieve them. Career decision-making requires a flexible proactive approach and is dependent upon the provision of information – a prerequisite for learners to acquire the capacity to make informed choices. Similarly, Stead and Watson (2006) maintain that career decision making is based on appropriate and organised information that is internal and external to the individual. Career education provides learners with career information so they can make informed choice of career paths they want to pursue. It encompasses educational, occupational and psychosocial details related to occupations (Jassat, Akhurst & Adendorff, 2000). Career education is supposed to equip learners with job searching skills, interview skills, and CV writing skills. Career education must include career counselling and career assessment to help learners choose careers that best suit them.

The problems with career education in schools, as Rooth (2005) points out, are that the focus is on self-knowledge and the world of work, without any comprehensive labour market information on occupations and training opportunities. In addition, there is a dire lack of information on the demands for specific skills and occupations. Also, educators are not well-equipped to offer career education. Learners thus are not informed about the trends and demands in the workplace, which may result in their feeling that career education is not that relevant. The world of work is

continuously changing; there is a vast amount of career information that Life Orientation educators need to gather to keep up-to-date. Although it is not highly rated by some learners, it is of vital importance in schools, especially high schools and innovative methods need to be employed to make it exciting and relevant.

It is evident from the discussions above that career education is extremely important for learners before they proceed to tertiary institutions. Provision of career education – one function of school psychological services – enables learners to make conscious informed choices of their career paths.

2.2.5.1.6 Sexuality education

Sexuality education is a lifelong process of acquiring information and forming attitudes, beliefs, and values about identity, relationships, and intimacy (Department of Education, 2004). It is the guidance given by an adult that enables a boy or girl to become a typical man or woman later in life. UNESCO (2009, p. 2) defines sexuality education as “an age-appropriate, culturally relevant approach to teaching about sex and relationships by providing scientifically accurate, realistic, non-judgemental information. It includes structured opportunities for young people to explore their attitudes and values and to practice the decision-making and other life skills they will need to be able to make informed choices about their sexual lives”. According to UNESCO (2009, p. 3) “the primary goal of sexuality education is that children and young people become equipped with knowledge, skills and values to make responsible choices about their sexual and social relationships in a world affected by HIV. This is important for the promotion of sexual health:

the integration of the physical, emotional, intellectual, and social aspects of sexual being in ways that are positively enriching, and that enhance personality, communication, and love”. According to Blaine (2006), promiscuity amongst learners is ever increasing and proof thereof is the increasing rate of teenage pregnancy in our schools, for example, the number of girls who fell pregnant in KwaZulu-Natal schools rose from 727 in 2005 to 887 in 2006 (Business Day, October, 2006). The current intervention programmes do not seem to have positive outcomes. Consequently, Education MEC Mr Senzo Mchunu, launched the ‘*My Life, My Future*’ campaign which is a holistic and integrated programme designed to bring about behavioural and attitudinal changes to arrest social ills that negatively impacted on the well-being of pupils and teachers (Mboto, *Daily Sun*, June 5, 2012).

According to the Department of Education (2004), “sexuality education is a central component of programmes designed to reduce the prevalence of sexually-related medical problems, such as teenage pregnancies, sexual abuse and sexually transmitted infections including HIV and AIDS”. Hence, Vincent (2007, p. 19) maintains that “good sex education is an important part of a well-balanced education”. Young people need accurate information about sexuality, including growth and development, human reproduction, anatomy, physiology, family life, sexual orientation, safe sex, sexual pleasure, contraception, abortion, sexual abuse, HIV and AIDS and other sexually transmitted infections. “Sexuality education should provide an opportunity for young people to question, explore, and assess their sexual attitudes in order to develop their own values, increase self-esteem, and develop insights concerning relationships with members of both genders”. Interpersonal skills, including communication, decision-making, assertiveness, and peer refusal skills, as well as satisfying relationships are skills that sexuality education develops in young

people. Thorough information on sexuality education is required so children are properly nurtured towards adulthood. Gilbert (2007) maintains that “sex education is larger than information, affirmation, or prohibition. In its address to the most intimate aspects of life – love, loss, vulnerability, power, friendship, aggression – sex education is necessarily entangled in the adolescent’s efforts to construct a self, find love outside the family, enjoy one’s newly adult body; in short, various relationships that might cautiously be called developmental”.

The subject of sex is still a taboo in many South African families and consequently educators who educate children about sex are scorned by parents who believe that their children are being taught immorality. According to Vincent (2007), like teenage pregnancy, sex education has long been associated with controversy and discomfort. Turnbull (2012) suggests that parents are the primary sex educators of their children but, often, parents think that talking about sex will make children want to experiment with it. Notwithstanding, sexuality education forms an important essential cog of the School Psychological Services programme and its main thrust should be the prevention of sex related problems. Educators are in a position to fill the void created by parents on this subject, but have to be trained to do so. According to Naidoo (2006), one of the main challenges to the effective implementation of sexuality education was that educators were not adequately trained and consequently lacked the necessary skills to teach sex education. The Department of Education (2013) recommends that all who teach sexuality programmes are informed, comfortable with the subject and open. Knowledge is power as Greathead (1998, p. xiv) succinctly explained this fact thus:

“Education for responsible sexual behaviour should include factual information, as well as the development of value clarification, problem-solving, decision-making and negotiation skills. Sexuality education cannot and should not be seen in isolation, but should rather be

regarded as an essential part of Life Skills training, which is why it needs to be included in a comprehensive guidance programme, including other ubiquitous problems in the lives of teenagers like drugs, alcohol, smoking, *etcetera*”.

Much of sexuality education is about thinking through problem situations, exploring values and opinions, as well as practising Life Skills. As Kohler, Manhart and Lafferty (2008) point out, “a comprehensive sex education lowers the risk of teen pregnancy and STDs. The abstinence-only programme had no significant effect in delaying the initiation of sexual activity or the risk of teen pregnancy and STD”. Hence, a School Psychological Services programme can make this aspect of life less complicated or less overwhelming for adolescents and, possibly, easily assailable.

2.2.5.1.7 HIV and AIDS education

With the ever increasing HIV and AIDS infection rate (the current prevalence rate, according to Statistics South Africa (2009), is estimated at 10.6%, which is about 5.2 million people) infected learners increasingly form part of the school population. Global estimates published by UNAIDS (2002) show that “more than half of the new infections occur among young people aged 15 to 24”, and that more than 25% of young people have had sexual relations before their 15th birthday. This means that an increasing number of learners attending secondary schools might be infected with the HI virus. According to Statistics South Africa (2009), the average South African teenager has a one in four chance of becoming HIV-positive by the age of 30. Hence the rationale for the introduction of HIV and AIDS education is to stem the HIV infection rate

amongst learners and educators and to ensure that the rights of infected learners are respected, namely, the right to education and the right not to be discriminated against.

The education sector has a key role to play in response to the epidemic. It is the one weapon at our disposal to limit the spread of HIV, to provide care, social and psychological support to those who are infected or affected by the epidemic, and also sustain the provision of quality education to all.

According to Greathead (1998) “a continued sexuality education programme should be implemented at schools for all learners, educators and other members of staff”. As the Department of Education (2004) states education on HIV and AIDS is the only ‘social vaccine’ available and recommended that age appropriate education on HIV and AIDS should form part of the curriculum and be integrated in the Life Skills education programme for all primary and secondary school learners. Education can be the world’s single most powerful weapon against HIV transmission. Learners should be provided with information on the reality of HIV and AIDS and STD’s in South Africa and acquire Life Skills necessary for the prevention of STDs, HIV and teenage pregnancy. Learners should also “be encouraged to make use of health care and counselling facilities, including reproductive health care. With information a culture of non-discrimination towards people with HIV will be cultivated”. The Department of Education views Life Orientation as one such vehicle. But, a word of caution expressed by Marneweck *et al.*, (2008), cannot be ignored, that with rising HIV and AIDS infections amongst learners, Life Orientation does not address their need for psychological intervention. The Life Orientation syllabus is not sufficient and that more teachers need to be trained as school counsellors. This is

due to a pervasive perception amongst educators that a three-day HIV and AIDS course makes one a specialist or qualified HIV counsellor (Rooth, 2005). Educator training in Life Skills and the introduction of Life Orientation in schools will equip learners with information – a preventive measure – but does not guarantee the support and care learners would need if infected with HIV. Schools should have trained HIV and AIDS coordinators who are also trained counsellors and armed with competence to design intervention programmes. According to Yeager and Walton (2011), psychological interventions are powerful tools rooted in theory which hold significant promise for promoting broad and lasting change in student and teacher mind-sets and behaviour, though they are context dependent and reliant on the nature of the environment. Interventions are designed to, among other things, promote wellness, manage stress, alleviate pain and express feelings.

2.2.5.2 Learner wellness or mental health services

These are service aimed at promoting the psychological or mental well-being of learners. Myers, Clarke, Brown and Champion (2012, p. 18) define wellness as “an active process through which people become aware of, and make choices toward a more successful existence, a quest for maximum functioning that involves body, mind and soul”. These services include guidance, counselling, substance abuse prevention and pastoral care.

2.2.5.2.1 Guidance services

This is the oldest of all the psychological services which focuses mainly on advice-giving. It became formalised in the South African education system during the introduction of school guidance and counselling. Thus its practitioners were called guidance counsellors or guidance teachers. There is no universally agreed definition of guidance, and according to Rooth (2005), guidance was variously defined depending on the approach used to provide its services, political contexts and agenda envisioned for the school guidance programme. The word ‘guidance’ means different things to different people. In historical terms, guidance has been used in the field of education to refer to the assistance given to learners in an attempt to resolve problems which lay outside the scope of the classroom teaching situations (Chuenyane, 1990; Makinde, 1988; Shertzer & Stone, 1976). With the passage of time it has grown to encompass the help given to learners in the solution of vocational, educational and personal problems (Chuenyane, 1990).

Guidance is defined as the process of helping individuals to solve problems and be free and responsible members of a world community within which they live (Chuenyane 1990, p. 8). The process of guidance is seen as a dynamic process which involves a series of sequential actions, activities or services the purpose of which is prevention, remediation and amelioration of human difficulties. In the same vein, Gladding’s (2000, p. 4) sees guidance as “a process of helping people to make important choices that affect their lives, such as choosing a preferred lifestyle”. In this connection, Mkhathswa (1996) asserts that guidance refers to the orientation of young people to realize and develop their educational and vocational potentialities. According to Mutie and Ndambuki (1999, p. 1), “guidance is a means of helping individuals to understand and use

wisely the educational, vocational and personal opportunities they have as a form of systematic assistance in achieving satisfactory adjustment to school and life in general”. In South Africa guidance was seen as a curriculum activity while counselling was viewed as a separate service [National Education Policy Investigation, 1992].

The term ‘helping’ permeates all the above definitions and is the core purpose and core of any school guidance programme. School guidance is not only about helping individuals solve problems (Chuenyane, 1990), it is about helping them understand themselves (Gillis, 1996), make important choices (Gladding, 2000), and helping them make use of their educational and vocational opportunities (Mkhatshwa, 1996; Mutie and Ndambuki, 1999). This means that guidance is essentially about helping with a clear purpose or goal in mind. This view of guidance is consistent with De Lange’s (1981) view that guidance is “a process of bringing the learner into contact with the world of reality in such a way that he acquires Life Skills and techniques which allow him to direct himself completely (i.e. to become self-actualising) within the educational, personal and social spheres and the world of work, in order to progress and survive effectively” (HSRC, 1981). All the definitions have ‘bringing learners into contact with reality’ as the main activity of a guidance programme. Thus guidance is not only characterized by its goal of helping but it is also characterized by the fact that it is not an event but a process, longitudinal in nature and oriented towards the future.

In an attempt to provide a synthesis of the above definitions, I draw on Makinde (1988), who summarised the four identifiable elements of guidance as follows:-

1. Process: guidance is not a single event but a series of actions or steps progressively moving towards a goal.

2. Helping: it is aiding, assisting or availing, the major purpose of which is the prevention and amelioration of human difficulties by provision of specialized help.
3. Individual: refers to students or clients in the school or other setting. Specifically, guidance is seen as assistance given to normal students.
4. The goal of guidance is understanding himself and his world: the individual comes to know who he is as an individual, aware of his personal identity, the nature of his person is clearly perceived as is his world, the aggregate of his surrounding and the people with whom he comes into contact with is experienced more deeply and completely. (Makinde, 1988, p. 42)

Since this study is about School Psychological Services, which includes guidance as one of its core services, it is important to understand how through guidance learners are helped to persevere despite the challenges confronting them. Guidance is an essential service vital for promoting and enhancing learners' mental health, thereby enabling to focus on their studies. This implies that the school has the responsibility to help learners to be free to express themselves and create a meaningful life. A guidance programme is thus designed to facilitate personal, social, educational and vocational choices and decision making. It aims at enabling and empowering learners to recognize their strengths and limitations, to make appropriate choices and decisions in order to realize their potential and become self-fulfilled, productive and responsible citizens. The school as a socializing agent has to assist in the transmission of clearly held beliefs and values. Guidance is, in this case, seen as an important integral part of the educational function of the school, as something schools could use to prepare youth for future adult roles.

On the delivery of guidance services, the National Education Policy Investigation (NEPI) Report (Mashile, 2000) contended that a systemic-preventive approach to the provision of guidance services to a community is better than the curative-individualistic approach which focuses on the

individual in the true psychological sense. The former takes into account the bigger picture of social dynamics and the environment in which learners live. In the systemic-preventive approach the emphasis is upon interventions and the creation of healthy environments which prevent individual personality breakdown and foster the development of personal capacities to cope with life's challenges. Such an approach is more cost-effective in terms of resources and manpower.

Guidance services should, therefore, be for all learners at different academic levels and should include *Learner inventory services* which helps counsellors to know learners as individuals, gather their personal, psychological and social data and understand their needs and concerns; *Information services* which is about providing learners with information so they are better prepared to make informed and meaningful choices in their lives; *Counselling services* which according to Chuenyane (1990), this is the heart of the guidance programme designed to facilitate self-understanding and self-acceptance, self-development and self-realization through the person-to-person relationships. Counselling is an individualised activity which focuses on the individual, providing him/her with the opportunity for self-study, decision-making, planning and the resolution of personal problems; *Placement services* which are designed to assist the learner in recognising, creating, and selecting educational and/or occupational opportunities which will facilitate his growth and development; *Follow-up services* which involves tracing former beneficiaries of a programme to assess how well they are functioning after intervention, and how effective the intervention was, so as to provide tangible evidence of the programme's effectiveness; highlights problems and programme inadequacies, successes and failures within the school curriculum that needs revision, improvement and change (Chuenyane, 1990). *Evaluation services* which "consists of making systematic judgements of the relative

effectiveness with which goals are attained in relation to specified students. It involves soliciting information from former learners, analyse, interpret and disseminate information concerning the degree to which the school programme is meeting the needs of individual learners” (Chuenyane, 1990, pp. 47-8).

However, in South Africa school guidance has not always been implemented to achieve the ideals as indicated above. For instance, Chuenyane (1990, p. 11) noted that, “Guidance in Black schools has, at best, received lip service and less implementation and has not occupied a place of prominence but to a large extent it has been left to vicarious chance”. The nature, characteristics and effectiveness of such haphazard programme of services and ways of remedying the situation is explored in this current study. Nevertheless, school guidance is an aspect of School Psychological Services and its principles could be used to explain the basis for practice of school psychology.

2.2.5.2.2 Counselling services

School Psychological Services are about helping learners communicate about issues affecting them, which is what counselling is. It is a type of psychological services which focuses on the affective aspect (i.e. emotions or feelings) of adolescent development. According to Chuenyane (1990), it is the ‘brain and the heart’ of the Guidance programme. Ferron (1990) refers to counselling as a process of helping students to discover their potential for intellectual, physical, social, spiritual and psychological development. Thus counselling is also seen as a helping relationship directed towards the personal happiness and social usefulness of the individual.

According to Van Dyk (2001, pp. 200-201),

“counselling is a structured conversation aimed at facilitating a client’s quality of life in the face of adversity. The purpose of counselling is twofold: (1) to help clients manage their problems more effectively and develop unused or underused opportunities to cope more fully, and (2) to help and empower clients to become more effective self-helpers in the future”.

According to Gladding (2000, p. 5), “the distinction between Guidance and Counselling is that whereas guidance focuses on helping individuals choose what they value most, counselling focuses on helping them make changes”. Counselling is seen as growth engendering and prevention and remediation oriented. It is primarily aimed at the welfare of young people. Through counselling, clients experiencing ‘rough spots’ are helped to smooth them with no personality defects incurred, motivated to make changes that are in their best interests, and self-defeating behaviours reversed – all these for the sole purpose of maximizing their potential. Rather than being focused solely on learners with problems, “counselling should have a preventive rather than a remedial function. It should be concerned with the promotion and protection of health”. Rooth’s (2005, p. 70) assertion that “counselling is understood as a curative concept where the school counsellor would offer specific help to learners who were experiencing problems” succinctly summarises the dominant general perception of educators and learners as to the importance of counselling in schools. Undoubtedly, South African learners need a daily dose of counselling services considering the many challenges they deal with daily, such as sexual abuse and domestic violence.

McLaughlin (1999, p. 13) postulates that “counselling in schools has three elements: an *educative function*, i.e., to develop students personally and socially in the context of the school; a *reflective function*, which is the exploration of the possible impact of and contribution to personal and social development and mental health of practices in the classroom and other aspects of the school community; and a *welfare function*, which is the responsibility to plan for and react to issues which impact on learners’ welfare”. She maintains that it is pupils with problems, personal and academic, that are being excluded in greater numbers and emphasises that counselling is an important part of a school’s response.

According to Mashile (2000, p. 95) the word ‘counselling’ is reserved for qualified ‘school counsellors’ or ‘school psychologists’. A qualified school psychologist needs to have at least a Master’s degree in Educational Psychology and to be registered with the Health Professions Council of South Africa (HPCSA). Counselling is thus of a curative (therapeutic) nature offering specific help to individuals experiencing difficulties in their lives. Counsellors are not usually employed in mainstream schools, but in special schools. Hence their services are limited to a relatively small number of learners. Maguire and Killeen (2003) cautioned that “counselling is a necessary part of the work of a school and that the acquisition of counselling skills demands training and an alteration of attitudes which educators must work to achieve”. Though used interchangeably, counselling and psychotherapy have slight and distinctive differences. Counselling – which is mainly offered as part of a psychotherapy process – is a short-term process that encourages the change of behaviour whereas psychotherapy is a long-term process of treatment that identifies emotional issues and the background of problems and difficulties. Counselling tends to be wellness oriented and provides increased insight and learning how to

effectively overcome problems and challenges, and psychotherapy is a treatment for a diagnosable mental health issue such as depression and suicide. Hence, Ivey and Ivey (2007) conceptualise psychotherapy as a more intense process, focusing on deep-seated personality, emotional and behavioural difficulties. It is considered an exploratory interviewing technique through which one person helps another to find relief from emotional pain. According to Kazdin (1993), psychotherapy includes a wide range of interventions designed to decrease or eliminate symptoms and maladjustment and to improve adaptive and prosocial functioning.

Summarising the definitions given above, counselling denotes a Psychological Service which is aimed at changing attitudes and behaviour of the clients by making clients analyse their capabilities, achievements, interests and decision-making skills. It serves both preventive and curative functions and empowers clients to make positive changes in their lives. Counselling is the domain of a trained counsellor and is targeted at individuals with problems. According to Low (2009) teachers' acceptance of school-based counselling is critical for the development of a sustainable counselling service that is beneficial to students.

“School counselling services are therefore typically provided by school counsellors who work with learners to develop their career awareness, to improve their understanding of self, and to improve their behavioural adjustment and control skills. This in turn makes students, including learners with disabilities, better able to participate in their educational programme. In many schools, the counsellor may also perform the functions of the school psychologists. Additionally school counsellors may: identify and refer learners who may be eligible for special education; secure parental permission for referrals; provide advice concerning a learner's level of

functioning, affective needs, and appropriateness of the Individualised Education Programme (IEP); provide learner Guidance and Counselling in keeping with the IEP, and provide supportive counselling for parents” (Kupper, 1991).

In South Africa, the IEP referred to above is called Learner Support Programme in the Inclusive Education Policy document, namely White Paper 6 (DoE, 2001). The removal of guidance and counselling from school curricula in South African led to the introduction of Life Orientation as a sensible replacement (c.f. 2.3.2.1). Although Life Orientation is part and parcel of School Psychological Services it, unlike its predecessor, does not entail the provisioning of counselling services. Traditionally, according to Juma (2011), indigenous Africans viewed counselling as a ‘White people’s thing’ and very intrusive, but mainstream psychology treats aspects of counselling as universal and beneficial to all people, irrespective of their culture or religion.

School Psychological Services also include pastoral or spiritual care, which guidance evolved from. Woodruff (2002) defines pastoral care as “a unique form of counselling which uses spiritual resources as well as psychological understanding for healing and growth. It is provided by individuals who are not only mental health professionals but also by persons who have had in-depth religious and/or theological training. It has evolved from religious counselling to in-depth counselling and pastoral psychotherapy which integrates theological understanding and pastoral identity with pastoral insight and psychotherapeutic practice”. According to Karner (2008), “it is a means of providing comfort to those suffering as a result of life’s challenges, including long-term or life-limiting illness, death of a loved one, separation and divorce, or aging”. It is shepherding the flock, protecting, tending to needs, strengthening, encouraging, making

provision, leading by example, and so on. In a school context, it is commonly applied to the practice of looking after the personal and social well-being of children under the care of the teacher.

Cowie and Pecherek (1994) suggest that pastoral care contains three main elements. They are: helping young people toward achieving the skills and personal qualities which they will need for informed decision-making and the acquisition of personal autonomy; acknowledging and suitably equipping learners with the skills required for adulthood, and providing help, guidance and support in order that learners can function effectively in school. Woodruff (2002) identifies “four fundamental functions of pastoral care, namely, healing, sustaining, guiding and reconciling”. It is non-sectarian and respects the spiritual commitments and religious traditions of those who seek assistance, without imposing counsellor beliefs on to the client. Woodruff (2002) contends that “the goal of qualified pastoral counsellors is to provide clinically accountable and spiritually sensitive care to those who seek their assistance”.

According to the Government Gazette, vol. 540, No. 33283 (2010), in the face of HIV and AIDS and the accompanying physical and psychosocial stress on learners and educators, schools need holistic counselling and pastoral care. However, the religious connotation behind its nomenclature is the reason why pastoral care was replaced by guidance and counselling. South Africa being a secular state with many different religions cannot promote one religion at the expense of the others as it goes against the letter of the constitution. This however does not mean that pastoral care cannot be used to help learners deal with their problems or any issues affecting their livelihood. Pastoral services in schools are better than nothing as anything that has learners’

best interests at heart should be used to ameliorate psychological pain and enhance mental health.

2.2.5.2.3 Substance abuse prevention programme

With the rampant abuse of drugs in South African schools, there is a huge need a prevention programme which is part and parcel of School Psychological Services, including school counsellors. Prevention is defined in literature as “a proactive process which promotes health by empowering people with resources necessary to constructively confront complex, stressful life conditions and to enable individuals to lead personally satisfying, and enriching lives” (Schwartz & Bodanske, 1981, p. 192). The need for a substance abuse prevention programme is clear as mooted from studies such as Botvin, Baker, Dusenbury, Tortu, and Botvin (1990) and Sikes, Cole, McBride, Fusco and Lauka (2009) indicating the abuse of drugs and alcohol by young people as a problem which is escalating at an alarming rate. In fact the political transformation which riveted world attention is being spoiled by the country (South Africa) becoming one of the most lucrative countries for drug trafficking, dramatically increasing alcohol and substance abuse, accompanied by a dramatic increase in crime. According to Sikes *et al.*, (2009) prevention of adolescent substance use is imperative as individuals who do not use substances during adolescence are less likely to use during adulthood. Maiden (2001) states “of particular concern is the trend for progressively younger age groups, from as young as eight or nine, becoming involved with drugs in the form of inhalants and alcohol”. Though it is impossible to authenticate the extent of drug abuse amongst young people, research indicates that most adolescents experiment with alcohol and /or drugs prior to leaving school, and as many as 25% of male

adolescents and 10-15% of female adolescents abuse alcohol at least once a week (Botvin *et al.*, 1990). As Swartz, de la Rey, Duncan and Townsend (2011) put it, the recognition that there are multiple factors that place adolescents at risk for developing a substance-use disorder led to the adoption of a risk-factor approach to understanding substance use among adolescents. This approach assumes that substance-use disorders have a number of causes and that as the number of risk factors escalates, the risk of an individual developing a substance-use disorder also increases. Swartz *et al.*, (2011) maintain that family dysfunction (drug use, criminal behaviour, negative life events, parent-child conflict or marital discord) is associated with adolescent drug use.

Drugs commonly used are marijuana (dagga) – the getaway drug for many – alcohol and a new drug *tik-tik* (chrysal meth) which has ravaged many poor communities in South Africa. Cocaine and crack, mandrax and heroin are also abused by young people. In KwaZulu-Natal there is a drug called ‘*whoonga*’ the concoction of which commonly includes antiretroviral (ARV) drugs, marijuana, soap powder and crystal meth. It is made more potent by adding various other substances which may include rat poison and powder detergents (Africa Health Placements (2015). Nevertheless, Gouws, Kruger and Burger (2000) states that alcohol is most commonly used among adolescents, for reasons such as its relaxing effect that accentuate bodily sensations; increasing physical arousal, reducing sexual inhibitions and minimising self-consciousness; altering perceptions of reality, which makes adolescents more willing to take risks; peer pressure to conform or feel accepted or part of the group; and drinking as a means of rebellion.

According to television news programme (*Morning Live*, 3 March 2009, 6-8 a.m.) ‘binge drinking’ has become a serious problem amongst teenagers. Drugs are also responsible for increased violence and bullying among urban adolescents. Another recent programme on SA television (3rd Degree, 26th February, 2008, p. 9.30 p.m.) tackled the issue of violence and making it abundantly clear that many South African children are out of control while principals and parents find themselves powerless to address drug abuse. As Gouws *et al.*, (2000: 182) note, drugs are used in all social environments and society’s ills and the break-up of family units produce fertile grounds for drug addiction. It is also common knowledge that peer pressure plays an important role in the beginning of drug addiction, as Dunu (2003) points out.

The word often bandied about when talking about substance abuse is ‘prevention’, which is geared toward helping communities marshal their own resources and develop their own alternative intervention. According to Maiden (2001, p. 78), “prevention programmes will promote a healthy lifestyle free from substance abuse”. According to Schwartz and Bodanske (1981), prevention programmes must be geared toward helping communities marshall their own resources and develop their own alternatives. Primary prevention refers to strategies that are designed to prevent the entire population from developing a disorder. Typical goals of prevention include fostering individual development and creating supportive social environments for all students (Meyers & Nastasi, 1999). Kauffman, Bantz and McCullough (2002) describe it as “the ‘catch-it-early’ approach that facilitates the prevention of problem behaviours before they escalate”. As Kauffman (1999) puts it, “prevention is by necessity a structure designed to avoid or attenuate failure”.

Hence, educators have to make adolescents aware of the dangers of drug and alcohol abuse; be well informed so they can recognise the symptoms of drug abuse; make parents aware of their children's indiscretions/ misdemeanours; know who to refer parents to for professional assistance; listen to, understand the reasons for the use and abuse of drugs, and counsel or arrange counselling for those who need help (Gouws *et al.*, 2000).

In order to curb the escalating number of substance abuse cases in schools, Kader Asmal (2002a), the then minister of education, recommended preventive education, the objective of which is to reduce or delay the likelihood of experimentation with drugs by providing information about the dangers of their use and misuse, and that drug education – included in the Learning Area of Life Orientation – should ensure that learners acquire age-and context-appropriate knowledge and skills to protect themselves from drug use, misuse and dependency. As Kauffman (1999) puts it, popular rhetoric supports prevention but action does not match the rhetoric. Primary prevention reduces the risk by ensuring that learners are not tempted to use drugs, and obviate the need for secondary or tertiary prevention. Maiden (2001) says that primary prevention is aimed at awareness and information services for the public. The goal of secondary prevention is to arrest the growth of the behavioural problem (i.e. drug use) whereas the goal of tertiary prevention is to keep substance abuse from overwhelming the individual and others in their environment. Similarly, Maiden (2001) states that tertiary prevention focuses on formal treatment to prevent the recurrence of abuse. According to Swartz *et al.*, (2011), the risk of adolescents developing a substance-use disorder is mediated by protective factors that provide adolescents with the resilience to withstand the pressures of living in a risky environment. Risk factors and protective factors together predict vulnerability to substance use and abuse. One such

protective factor is Life Skills education which acts to buffer the probability of drug use occurring.

The National Department of Education is in the process of producing a policy document to address drug abuse which schools will be mandated to enforce. The weakness of such an initiative – desperate as it sounds – is that it takes care of the symptoms but does not address the root cause of the problem. However, Life Orientation intends to empower learners with assertiveness skills to handle peer pressure and provide them with information as to the dangers of drug and alcohol abuse. As such School Psychological Services have an important role to play in correcting – through drug abuse preventative programmes – the destructive behavioural patterns which characterise adolescence. But, according to Herman, Merrell, Reinke and Tucker (2004), “in theory, prevention is better than intervention, however, it is unpopular in practice as it requires confronting and altering socio-political structures, practices and values in defining solutions. Often, prevention deals only with the symptoms of underlying social problems. Nevertheless, successful prevention practices do not always translate into effective social policies”.

2.2.5.3 Learner support services

These are services framed by the Department of Education’s policy – Building an Integrated Education and Training System (Department of Education, 2000) – offering support in promoting learners’ well-being. These are support services which are neither learning areas, nor learner wellness services. They offer supplementary support to learners, especially learners

manifesting physical, intellectual, behavioural and academic or learning disabilities or problems. They are inclusive education, learner support, remedial and parental involvement.

2.2.5.3.1 Inclusive Education (IE)

White Paper 6 (Department of Education, 2001) is a policy statement – a political resource and legislative framework – which led to the introduction and implementation of inclusive education in South African schools. Inclusive education is about providing schools with capacity to serve all children. This means that schools should welcome all learners, regardless of their characteristics, disadvantages or difficulties. The rationale for the introduction of inclusive education was the belief that the right to education is a basic human right and the foundation for a more just society. “It is a means of enabling mainstream schools to serve all children in their communities, its focus being on learners who traditionally were excluded from educational opportunities – also learners with special needs and disabilities” (UNESCO, 2001, p. 4). The Salamanca Conference had to deal with the situation in which children with special educational needs were experiencing barriers to their education, and existing policies were incapable of addressing the “problems and barriers they encountered in schooling which could not be overcome simply by developing separate systems and schools for children with special educational needs” (UNESCO, 2001, p. 3). The slogan the youth used during Apartheid was, ‘separate cannot be equal’ resonates with separate provisioning for learners with special needs. The conference argued that schools should,

“accommodate all children regardless of their physical, intellectual, social, emotional, linguistic or other conditions. This should include disabled and gifted children, street and

working children, children from remote or nomadic populations, children from linguistic, ethnic, or cultural minorities and children from other disadvantaged or marginalised areas or groups.” (UNESCO, 1994, p. 6)

The inclusive schools

must recognise and respond to the diverse needs of their students, accommodating both different styles and rates of learning and ensuring quality education to all through appropriate curricula, organisational arrangements, teaching strategies, resource use and partnership with their communities (UNESCO, 1994, pp. 11-12)

The conference felt that IE was the most effective means of combating discriminatory attitudes and creating caring and welcoming communities. Learners with disabilities or special needs are not intellectually inferior to learners without disabilities, they are just different. Lomofsky and Lazarus (2001), maintain that “inclusion is more than just mainstreaming as it is regarded as a moral issue of human rights and values important in the creation of an inclusive society, and reflects a move from a deficit model of adjustment towards systemic change”. Inclusive Education benefits learners by not using disabilities to segregate learners but as ways of including them at every level of educational practice, provisioning education for disabled learners based on what is needed to support them, empowering them by developing their individual strengths and weaknesses to participate critically in the process of learning, making facilities and resources more accessible to all learners, and introducing strategies and interventions to assist teachers to cope with a diversity of learning and teaching needs to ensure that difficulties are overcome (Department of Education, 2005).

Riddel and Brown's (1994) contention sums up the essence of inclusive education when they say that:

“the aims of education for children and young people with disabilities and significant difficulties are the same as those for all children and young people. They should have opportunities to achieve these aims to associate with their contemporaries, whether similarly disabled or not and have access to the whole range of opportunities in education, training, leisure and community activities available to all” (1994, p. 79).

According to Donald *et al.*, (2002, p. 32), inclusive education comprises two major thrusts to address barriers to learning, namely, prevention and support. Such barriers can either be based on contextual disadvantages, social problems or individual disabilities and difficulties in learning. Prevention is directed at transforming educational institutions and curricula to facilitate access to education for all learners, irrespective of their different learning needs. Support, on the other hand, focuses on providing support to schools, staff, parents and students with specific learning and developmental needs. These thrusts mean that every level of the system must be developed to accommodate diversity and to provide supportive teaching and learning environments for all. The policy of inclusive education acknowledges that differences are to be respected and discrimination eliminated; that learning can occur in various ways and at different paces; and that the active participation of learners is encouraged and supported appropriately at all levels of the teaching and learning process.

Like everybody else, learners with disabilities should have unlimited access to School Psychological Services. Psychological services utilised in an inclusive setting are assessment and the identification of the learning disability, the level of support required and whether it can be provided in a normal school, a full-service school or an ELSEN school (DoE, 2001). Inclusive education can also be viewed as a policy which facilitates the achievement of an objective of School Psychological Services of making services available to all children irrespective of their barriers to learning they experience. Kauffman, Bantz and McCullough (2002, p. 150) maintain that, all children should be entitled to whatever services they need, and this kind of education should not require highlighting children's differences. Children must be seen as more alike than different, all entitled to the same high-quality education. What we now see as difference or special must become routine, accepted as part of the normal such that the stigmatization and separation of children is avoided.

According to the NCSNET/NCESS report (1997), appropriate and effective education must be organised in such a way that all learners have access within a single education system that is responsive to diversity. Education should be about creating the least restrictive environment for all children.

Inclusive education is seen as a political resource for providing the appropriate context for the proper implementation of School Psychological Services. As Colby *et al.*, (2000) put it, reducing all forms of discrimination is critical to quality improvement in learning environments. Hence, the School Psychological Services Programme, including school counsellors and other health professionals, should be the vehicle through which Inclusive Education is advocated (defended),

implemented and seen to bear fruits. According to Van der Elst (2008), “inclusive education is about transforming schools from centres of learning to inclusive centres of learning, care and support, where support is provided for children vulnerable to exclusion or marginalisation and where barriers to learning are overcome”. Such supportive environments will require learner support (or remedial) educators, counsellors, and psychologists, who, apart from screening, identifying, assessing learners and making referrals will have basic counselling skills. As Erhard and Umansky (2005), counsellors are expected to be proactive leaders and advocates for the success of all learners in schools, provide high quality services to learners with disabilities, create a healthy climate in the schools and serve as an essential resource for learners, educators, parents, and administrators. However, studies by Naicker (2000), Muthukrishna (2002) and Ntombela (2006) identified the lack of capacity as one of the factors affecting the implementation of inclusive education in South African schools. Ntombela (2006) cautions that it is highly presumptuous of the DoE to expect a two-hour workshop to deal effectively with a complex issue of inclusion and simultaneously capacitate educators to implement Inclusive Education. Although it is cumbersome to prepare educators for the implementation of Inclusive Education, the idea behind its conception is commendable.

2.2.5.3.2 Learner support

Learner support is part and parcel of the White Paper 6 on Special Education (Department of Education, 2001). Although the National Committee on Education Support Services (NCESS) report spelt out the government’s intention to challenge the *status quo* of exclusion of learners with special needs from mainstream schooling, the present education system still disadvantages

those learners who are experiencing learning barriers and developmental challenges and, as Waghid and Engelbrecht (2002) put it, “there is need for the system to transform towards the development of a system that accommodates and respects diversity and the vigorous participation of all social partners, role players and communities so that social exclusion and negative stereotyping can be eliminated”.

Learner Support as framed within Inclusive Education provides time and assistance to a learner to realise his or her potential (Naicker, 2000, p. 3). In order to achieve this, White paper 6 on Special Needs Education (Department of Education, 2001), creates such space “by acknowledging that all children and youth can learn and that all children and youth need support, enabling education structures, systems and learning methodologies to meet the needs of all learners, acknowledging and respecting differences in learners, whether due to age, gender, ethnicity, language, class, disability, HIV or other infectious diseases, making it broader than formal schooling and acknowledging that learning also occurs in the home and community, and within formal and informal settings and structures, changing attitudes, behaviour, teaching methods, curricula and environments to meet the needs of all learners, and maximising the participation of all learners in the culture and the curriculum of educational institutions and uncovering and minimising barriers to learning” (Department of Education, 2001, p. 16).

In tandem with Inclusive Education, Outcome-Based Education (OBE) was developed with matching the principles. According to Naicker (2000, p. 3), “OBE has three premises, namely: all learners can learn and succeed, but not on the same day in the same way; successful learning

promotes even more successful learning and, schools control the conditions that directly affect successful school learning”.

It implies that “all learners have the capacity to learn and achieve their full potential but that cannot happen in the same way or within the same period. Learners should progress according to their age cohort and time should be allocated to a learner who requires additional assistance. If a learner needs assistance the learner does not have to be kept back in the grade”. All learners, experiencing learning barriers or not, are entitled to academic, social and emotional support, and schools should have programmes in place to make all these possible.

Muthukrishna (2002) argues that building capacity within schools is critical and dependence on the limited number of available professionals for support is not feasible. Schools should therefore capacitate themselves with support structures, one such structure being the school-based support team. The role of the team includes facilitating the development of an ethos in the school that values learners, facilitating the on-going analysis and identification of barriers to learning and participation, facilitating processes to address and minimise barriers to participation, developing links with and access community resources, facilitating whole school development and school-based teacher development programmes, facilitating parental involvement, building school community partnerships, and twinning with other schools to form school clusters to share expertise, and material and human resources and plan joint programmes (Muthukrishna, 2002, p. 7). Collaboration between schools and communities will enable schools to fulfil their mandate of providing learners with the best support, but as Dunbar-Krige et al., (2010) points out, schools generally find it hard to maintain their communities as partners in education.

School Psychological Services are about preparing young people to perform well academically and face life's challenges head on. Psychological Services, School Guidance and Counselling, and learner support services are all bound by similar principles and are therefore meant to achieve the same goal in schools – helping learners to succeed in school by responding to their needs and removing (or attempting to remove) any obstacle thwarting the development of their full potential. They are all essential components of School Psychological Services and as such they share a common purpose and serve to achieve the same goals. Most importantly, these services complement – not replace – each other.

2.2.5.3.3 Remedial intervention

The word “remedy” means “to cure, supplying a remedy, intended to correct or improve deficient skills in a specific subject” (Oxford Dictionaries, 2011). Wall (2006) defines intervention as “an interaction between two people to bring about change, which must be planned carefully to ensure effectiveness and appropriateness”. Bunning (2004), on the other hand, sees intervention as a shared aim to instigate and achieve a change in a child's existing situation by utilising a defined strategy or approach. It involves selecting and using an optimal method to arrive at a desired outcome. Remedial education, also referred to as developmental education, is defined as support services in basic academic skills which addresses the needs of a diverse population of under-prepared learners with programmes designed to address deficiencies in reading, writing and maths. The terms ‘remedial learner’ and ‘remedial education’ are social constructions that have strong negative connotations (Astin, 1998). Just as in medicine one gives

a remedy to cure an illness, so in education there must be something wrong with the student who needs to be ‘remedied’. It focuses on the resolution of psychological or emotional distress, psychopathology, mental health concerns, or medical disorders.

Placement in a remedial education class is recommended for a learner who has “(i) low performance in reading, (ii) low performance in mathematics, and (iii) an inability to verbally express ideas or write or dictate a meaningful sentence” (Astin, 1998). According to Astin (1998), “there are at least three aspects of the remedial concept that are misleading. First is the use of categorical terminology to describe a phenomenon that is relativistic and arbitrary. Most remedial learners turn out to be those who have the lowest scores on some sort of a normative measurement – standardised tests, school grades and the like, but the cut-off is arbitrary. Secondly, the ‘norms’ that define a ‘low’ score are highly variable from one setting to another. Thirdly, and perhaps most importantly, the problem with the concept of remedial student is that there is little, if any, evidence to support the argument that these learners are somehow ‘incapable’ of learning, that they have markedly different ‘learning styles’ from other learners, that they require some radically different type of pedagogy, or that they need to be segregated from other learners in order to learn”.

It is for the reasons given above that remedial education has been re-conceptualized as learner support. Hence, the so-called remedial schools are now called ELSN (Education for Learners with Special Education Needs) schools and remedial educator called a learner support educator.

2.2.5.3.4 Parental involvement (Home-school link)

Hill and Tyson (2009) define parental involvement as “parents’ interactions with schools and with their children to promote academic success” (2009, p. 741). It is narrowly seen as “the participation of parents in regular, two-way, and meaningful communication involving student academic learning and other school activities”. Parental involvement can be divided into two frameworks, namely, school-based involvement strategies (e.g., volunteering at school, communication between parents and teachers, and involvement in school governance), and home-based involvement strategies including engaging in educational activities at home; school support for parenting; and involvement between the school and community agencies. Parental involvement can be described as the willing and active participation of parents in a wide range of school and home-based activities (Van Wyk & Lemmer, 2009) or a dynamic process whereby educators and parents work together for the ultimate benefit of the learner (Davin & Orr, 2007). According to United Nations Children’s Fund (UNICEF, 2000), “positive early experiences and interactions are vital to preparing a quality learner as higher levels of parental involvement that includes parents reading to young children is associated with higher test scores and lower rates of grade repetition in primary school. This implies that effective and appropriate stimulation in a child’s early years influences the brain development necessary for emotional regulation, arousal, and behavioural management”.

“The home environment is a powerful predictor of school learning for learners – their level of achievement, their interest in learning, and the number of years of schooling they will attain”. As a consequence, there has been an increase in the development of family participation in

education (Christenson & Buerkle, 1999). According to The Family Strengthening Policy Centre (2004), parental involvement occurs when parents actively, critically, resourcefully and responsibly contribute to promoting and developing the well-being of their communities. Adolescents, as Gouws *et al.*, (2000) argue, need their parents to be there for them to provide moral and emotional support when necessary. Lack of parental interest and support may have negative effects on the adolescents: poor school-work, low self-esteem, poor social adjustment, and deviant and antisocial behaviour. As Samara and Smith (2008) point out, with increasing rates of bullying putting schools in the spotlight, parents involvement can be used as a strategy to reduce it.

According to Louw (1991), parents influence their children's ability to adjust to the school environment. They therefore have an important supporting role within the framework of School Psychological Services. This sentiment is shared by Gutkin and Conoley (1990, p. 209) when they say that if school psychologists hope to bring any about meaningful improvements in the lives of children, they will have to exert meaningful influence on parents and teachers. By providing treatment to children through primary caregivers such as parents and teachers, indirect services provide psychologists with a vehicle for influencing and modifying both the significant adults in children's lives and the children themselves.

The purpose of parental involvement is to demonstrate the importance of collaboration or teamwork between schools and the communities they serve. Bronfenbrenner's theory contributes to the notion that children and families are members of multiple environments and that "nested connections" exist between children, families, schools and social service agencies (Christenson,

1999, p. 715). According to Chen and Gregory (2011), “ecological systems theory describes multiple levels of influence on child development in which the home and the school exert unique as well as combined forces on the growth of an individual”, with Epstein, Sanders, Simon, Salinas, Jansorn, and Van Voorhis (2002) referring to the two “separate settings ‘overlapping spheres of influence,’ with distinct roles but common goals”.

Research studies reported that parents who participate in their children’s schooling frequently enhance children’s self-esteem, improve their children’s academic achievement, improve parent-child relationships and, help develop positive attitudes towards school and a better understanding of the schooling process (*Sowetan*, August 25, 2009, p. 9). Concurring with the Parental Corner (*Sowetan* 2009), Chen (2008, p.1) lists the benefits of parental involvement as enhancement of academic performance, better classroom behaviour; improved reading skills and improved educator morale. However, Chen (2008) identifies time constraints as the greatest barrier to parental involvement.

Ramey (2009, p. 5), listed “five most important things for parents to help children achieve success, namely, making sure that they are prepared for school; sending happy children to school as children who feel loved and happy make good learners; not getting too involved in school, and grades matter but they are not the ultimate indicator of a child’s value”. It is important for parents to partake regularly in school activities and maintain two-way communication with the school about their child’s academic performance.

It is evident that parental involvement, care and support serve as nourishment for adolescents' psychological well-being. "When parents are involved students have better school attendance, increased motivation, decreased use of drugs and alcohol, and fewer instances of violent behaviour" (Michigan Department of Education, 2002). Unsurprisingly, as Marais and Meier (2010) put it, lack of parental involvement is the biggest cause of disciplinary problems in schools. According to Hill and Tyson (2009) "in the current context of increased demand for parental involvement in education (e.g., school choice, course selection), without effective parental involvement, adolescents' opportunities are often foreclosed, leading to lost potential, unrealized talent, diminished educational and vocational attainment, and widening demographic gaps in achievement, as the home is a powerful predictor of school learning for students – their level of achievement, their interest in learning, and the number of years of schooling they will attain". There is no standalone departmental policy document on parental involvement yet – though it is mentioned in the South African Schools Act of 1996. As such, parental involvement is a key aspect of School Psychological Services.

All Psychological Services are meant to be interventions to help learners adjust to the worlds of school, home and community. Some are offered either as separate learning areas of the school curriculum, or infused in learning areas (for example, Life Orientation); others are presented in the form of classroom practices, norms and standards for teachers and school policies. Their success depends on the collaboration between the departments of education, health, social welfare, and safety and security and the parents.

2.3 Participants' experiences of School Psychological Services

Apart from interrogating the state of psychological services in South African schools, it is important that the study explores and discusses participants' experiences thereof, especially adolescent learners in secondary schools, who are considered the main beneficiaries of School Psychological Services.

2.3.1 Adolescence: *Why it stands out?*

In no order of things is adolescence the simple time of life – Jean Erskine Steward (American Writer, 20th Century)

According to the World Health Organisation (2013), around 20% of the world's children and adolescents have mental health problems. It is for this reason that this study focuses on adolescents, as almost 100% of learners in secondary (high) schools are adolescents who would benefit from School Psychological Services. This is because, as Crespi and Hughes (2004) contend, adolescents are in crisis in school, home and in community. These incidents have a dramatic and potentially traumatising impact on learners and personnel. With an increasing array of problems, from alcohol and drug addiction to teenage pregnancy, the nation's youth are facing difficult challenges. The sexual abuse of young females is approaching endemic proportions, depression and suicidality in adolescents has steadily increased and adolescent violence is impacting every facet of society, resulting in an increase in incarceration for violent and illegal behaviour (*ibid*). Family problems experienced by adolescents alone can seem daunting, with such issues as divorce, abuse and discord changing the very fabric of family structure, and these

significantly impact on their development. Hence, Psychological Services in high schools are meant to enhance adolescent learners' psychological well-being.

Olivier, Greyling and Venter (1997, p. 25) define adolescence as a time of moving away from the safety of childhood dependency and towards the challenge of adult maturity. Similarly, Sdorow (1990, p. 153) sees it as the transition period lasting from the onset of puberty to the beginning of adulthood. Although it is difficult to define adolescence in terms of chronological age due to cultural differences, it is generally accepted that it starts between the ages of 11 and 13 years, and usually ends between the 17th and 22nd years (Gouws *et al.*, 2000, p. 4). As Louw (1991, p. 377) states, the end of adolescence is not indicated by clear characteristics as is the beginning. However, its onset is marked by clearly discernible physical and physiological changes, for example, body growth accelerates, reproductive organs become functional, sexual maturity is attained and secondary sexual characteristics appear. Determining the end of adolescence is more difficult since it is characterized by less conspicuous changes than puberty – the biological clock determines changes in adolescence whereas changes in adulthood are socially determined. Puberty is characterized by the maturation of the sex glands (Gouws *et al.*, 2000, p. 2).

Gladding (2000, p. 396) says that “there are few situations in life more difficult to cope with than an adolescent son or daughter during their attempt to liberate themselves”. This implies that although most adolescents make it through this period of their lives in a healthy way, some experience great difficulty. Secondary school counsellors must deal with this difficult population and the problems unique to it, and appreciate that some problems are more cyclical than others.

However, many other concerns that are connected with adolescents are situational and unpredictable. The dynamic nature of modern society presents a serious challenge and adolescents have to possess the equipment to lead a meaningful life and to make a meaningful contribution to the world of fellow human beings around them.

According to Erik Erikson's developmental theory (Louw, 1991, p. 62), the developmental stages are characterized by developmental tasks and interpersonal problems; and each of stage – which takes place in accordance with a genetically determined plan – is characterized by a crisis, that is, the situation in which the individual must orientate himself according to two opposing poles. During the intimacy versus isolation stage – which coincides with adolescence – early adulthood begins when one begins to acquire a feeling of intimacy and simultaneously overcome a feeling of isolation. Intimacy implies a close relationship with other people, usually including a marriage relationship. Commitment to a relationship and a career are signs that the individual has successfully transitioned from adolescence to adulthood.

Louw (1991) maintains that adolescence begins during puberty and ends when the individual, from a social point of view, begins to fulfil adult roles, is independent and self-provident and from a psychological point of view, “adolescence ends when the individual is reasonably certain of his/her identity, is emotionally independent of his parents, has developed his own value system and is capable of establishing an adult love relationship and adult friendships” (Louw, 1991). Gillis (1996, p. 70) on the other hand, divided adolescence into three stages, namely early or child adolescence where the individual learns to cope with the demands of rapid physical growth, mid-adolescence during which the individual begins to experiment with developmental changes in a number of areas and adult or late adolescence during which the individual begins to

form a meaningful and stable personal identity, and take mature decisions with regard to his/her future. From the above, it is evident that being an adolescent is like being at the cross-road of development.

When viewing adolescence as a transition to adulthood one should always keep in mind that adolescents are not simply in the process of becoming someone else, they are individuals in their own right. In the past adolescence was regarded as an individual racked by inner turmoil and attention was thus directed toward adolescents' problems. There has been a change in perspective and unlike in the past adolescents are no longer classified as rebels who are in conflict with their parents, whose lives are fraught with greater tension, disruption and impulsive action. Gouws *et al.*, (2000) indicate that most adolescents get along well with their parents, respect them and want to be like them. Nevertheless, it cannot be denied that adolescence is a difficult phase during which a variety of changes take place in the domains of 'becoming' (Gouws *et al.*, 2000: 4). Obviously, some degree of stress and conflict is bound to occur. According to Sperling (1957, p. 143), the real problems of the adolescents lie in the area of social, emotional, moral, and economic maturity. Hence their development and the perceived need for Psychological Services are what this study proposes to investigate.

The discussion of adolescent development above is meant to demonstrate the behaviours of adolescents and how Psychological Services can help them understand themselves and their roles in society. Parents also have to understand their role to guide children to develop into fully functioning adults, however, the impact of environmental factors on youth behaviours cannot be underestimated. Adolescents need assistance to find their way in the world that is rapidly

changing and increasing in complexity. Hence, there is a dire need for Psychological Services to make their journey to adulthood less turbulent and problem-free. Parents, guardians and the school should play an active role in this endeavour.

2.3.1.1 Adolescents' developmental needs

Adolescents have developmental needs which, apart from the family, should be satisfied by a School Psychological Services Programme. Adolescents, according to Gouws *et al.*, (2000, p. 4), “are complex beings with intellectual, emotional and social qualities which develop in different ways, at different rates and at different stages of life”. Development in one domain influences that in others, and the same applies to problems. For example unwanted pregnancy (physical) can cause scholastic problems (cognitive), which may lead to serious social and emotional problems. It is therefore pedagogically unsound to treat the physical or cognitive development as an independent entity on the assumption that it is completely unrelated to other domains. Currently, formal education is preoccupied with the cognitive (intellectual) domain and completely disregards the emotional, moral and social aspects of adolescent development.

According to Ellerbrock and Kiefer (2013), “the transition from middle to high school is often a seminal and challenging transition and is referred to as one of the most defining parameters of development in the second decade of life”. What makes the transition difficult is the schools failure to meet adolescents' developmental needs. Schools have become larger, increasingly complex, increasingly impersonal and developmentally unresponsive (*ibid*). Developmentally responsive school environments meet student needs and promote a smooth transition from one

school to the next. Unfortunately, according to Ellerbrock and Kiefer (2013), there is a “developmental mismatch” between students’ needs and the organisation of their school environments. The self-determination theory states that individuals have basic psychological needs for competence, relatedness and autonomy and supporting these needs is central to promoting a developmentally responsive school environment. High school interchanges, lunch, clubs and extracurricular activities brings forth much confusion and stress. Students’ basic and developmental needs for connectedness and positive peer relationships may not be met in environments where ambiguity and anonymity are commonplace.

According to Smalley (2013) “adolescents have six basic needs which need to be fulfilled in order to become healthy, well-adjusted adults. They are, the need to develop their distinct identity and a sense of uniqueness; the need to progressively separate themselves from their childhood dependency on parents; the need to develop meaningful relationships with peers and others outside the family; the need to develop their capacity to relate well to the opposite sex; the need to gain the confidence and skills to prepare for a career, economic independency, and other adult responsibilities and, the need to fashion their faith and value commitments and basic attitude toward life”. It is important that parents communicate with them to fill the adolescent’s ‘emotional gas tank’, so they know that they are valued and that parents or adults will always be available when needed. They need support and genuine commitment from important adults, opportunities to be successful and to be respected, trusted and loved. This means that in their physical, cognitive, emotional, and moral development interaction with significant others, be it parents, counsellors and priests is important as nourishment to their souls.

It is important for schools to continue listening to students' voices in order for school environments to be responsive to their needs. Concerted and coordinated efforts at high school level are needed to provide students with sustained support and they navigate through school and life.

2.3.1.2 The implications of School Psychological Services to adolescent development

Since the study focuses on adolescents, it is important to investigate or explore how Psychological Services relate to adolescents' developmental challenges. I chose to focus on adolescence because it is a time of substantial emotional and developmental growth which can herald serious and overwhelming psychological difficulties and/or problems (Hassiotis & Turk, 2012). Many problems of development originate in the child's out-of-school life, meaning that Psychological Services must concern themselves with the total environment of the child and attempt to modify the situation. There are many ways in which Psychological Services impact on adolescent development. For example, according to Sigelman and Rider (2006), "adolescents are self-conscious about their appearance and worry about how others will respond to them". This can cause negative (e.g. low self-esteem) and positive feelings and a lot of confusion. Pubertal changes in both boys and girls may prompt changes in family relations, with adolescents physically distancing themselves from their parents and becoming more independent. They are more likely to experience conflicts with their parents – especially their mothers – more often about minor issues such as unmade beds, late hours, loud music than about core values. Hormonal changes in early adolescence may contribute to this increased conflict with parents and to moodiness, bouts of depression and anxiety, lower or more variable energy levels, and

restlessness. They experience more behaviour and adjustment problems, are likely to become involved in dating, drinking and having sex. At this stage, the need for psychological intervention, both in and outside the school setting, cannot be over-emphasised.

Physical development relates to physical and sexual maturity; cognitive development refers to the development of formal thought, mastery, abstract and problem-solving skills; social development is about the development of the self in relationships and conflict resolution, and moral development is about the development of the conscience. Despite the role of the parents in helping adolescents deal with the challenges unique to this stage, Psychological Services in schools are crucial to making adolescents understand the causes of their behaviours, help them accept themselves and worry less about their appearance.

According to Jones (1977), adolescents in school and in society have to face many problems of adjustment and identity; they have to learn to be independent, to make decisions for themselves, to take responsibility, to weather a crisis, sometimes to live with a difficult situation. Most adolescents survive this stormy period much strengthened by their experience and without needing to talk to a counsellor about their problems. The counsellor's role is to give support to those adolescents who do feel insecure, threatened, overwhelmed, misunderstood, unsure of their role, undecided about what they should do, and who to ask for help. A counsellor could assist in laying the foundation for a more integrated and balanced adulthood.

According to Gouws *et al.*, (2000, p. 122), adolescents spend a considerable amount of time in school, and for most, it is the centre of their world. This is where they learn and develop skills,

socialise and make friends, and where they prepare and plan for the future. This view concurs with Bojuwoye's (1992) assertion that "in no other setting is counselling more urgently needed than in secondary schools in developing nations". This is because secondary schools contain adolescents who are particularly vulnerable to the problems of modern living, partly because they are undergoing baffling physical and emotional changes and partly because of their lack of experience. Hence, the school remains a key setting where youth can receive the help they need to achieve psychological maturity and individual development. Apart from acquiring gender roles, which is influenced by their cognitive development, they have issues around impulse control, which often makes them do things without thinking of the consequences. Intervention by school counsellors can make all the difference, empowering youth to overcome challenges and give them a sense of purpose. Though the influence of family, friends and peers, cultural contexts, religion, temperament and education has positive effects on adolescent development, school counsellors are capable of making this transition from childhood to adulthood smooth, less cumbersome and less overwhelming. Counsellors' interventions will contribute to adolescents emerging from the challenges emotionally unscathed.

The different phases of adolescent development focus on different aspects of their persona. Each developmental phase has its own unique challenges or problems. Different forms of School Psychological Services—for example, guidance, counselling, Life Orientation, and so on—impact on each of the developmental phases.

2.3.1.3 School Psychological Services and adolescent well-being

According to Henn (2005) “adolescence is a developmentally challenging time for all young people comprising of years of turmoil, emotional instability and the questioning of previously accepted values and rules”. “While most adolescents successfully accomplish their developmental tasks and become self-sufficient members of society, for some the developmental tasks could lead them to increased mental health problems” (Shin, 2005). Henn (2005) considers “adolescence to be a time of considerable vulnerability to psychological problems, yet the many competing demands placed on schools and their focus on the academic does not always enable them to prioritise the psychological and emotional well-being of learners”. Shin (2005) states that “many young people have diagnosable psychological (or mental health) problems, with about 10% of adolescents having severe emotional disturbances which significantly impact on their ability to function in the community”. The problems include depression, anxiety and loss of behavioural and emotional control. According to Shin (2005) the prevalence rate of depression among adolescents between the ages of 13-18 is estimated at 8.3% which is higher than the rate (2.5%) found in children. Herman *et al.*, (2004) attribute maladaptive cognitions as the primary risk factor for developing depression, which increases the risk of other anti-social behaviours such as substance abuse and suicidal behaviour. To make matters worse, the stigma attached to the use of psychological services and the lack of information about availability of and eligibility to use the services in schools and community health institutions prevent youth from obtaining appropriate mental health care. Kanzdin (1993) opines that mental health of adolescents has been neglected (i.e. receives much less attention than children) because adolescence is viewed as a transitional period between childhood and adulthood; perturbations of adaptation and

emotional and behavioural problems are considered age- and stage-specific and hence likely to pass with time, and marked biological changes, maturation of psychological processes (e.g. cognitive development), and sources of influences (e.g. peers) and opportunities contribute to the dynamic nature of adolescent development.

According to Roeser, Eccles and Sameroff (1998), “learners’ construction of meaning within different learning environments is the key mediator between the actual context and their beliefs, affect, and behaviour within that context. This individual-level meaning-making process often occurs in relation to how well the learning environment provides opportunities for the child to develop a positive sense of personal competence and autonomy and positive relationships with teachers. To the extent that school is experienced by the child as supporting these needs, their academic engagement, achievement, and mental health will be enhanced” (c.f. *Appendix M*).

Some issues that adolescents need help with are anger management and aggression; anxiety; attention and learning problems; parent relationships; peer relationships; identity (the need to belong); self-concept and self-esteem issues; career information; sexual health (including information about safe sex and sexually-transmitted illnesses); information; safety and security; stability and love (especially from significant others); and counselling, for depression, eating disorders, drug and alcohol abuse etc. (Henn, 2005; Shin, 2005).

The needs identified above reflects Maslow’s hierarchy of needs, namely, the physiological needs, the need for safety and security, the need for love and belongingness, the self-esteem needs, the need to know, the need for aesthetic beauty, and the self-actualization needs. These

needs have implications for understanding the motivation of individuals (Neukrug, 2007) since they impact on learners' psychological and emotional well-being, as satisfying these needs breeds optimism, creativity, confidence and a high self-esteem.

Schools can provide this kind of support if they have psychological services. According to Kalberg, Lane, Driscoll and Wehby (2011), high school affords learners a broad range of curricular and extracurricular offerings that allow them to identify and develop their areas of interest, and simultaneously provides them with expanding social roles as they establish new relationships with peers and adults within a broader social network. At the same time, schools should embrace the notion of three-tiered models of prevention to meet the academic, behavioural, and social needs of an increasingly diverse student body. Nath and Garg (2008) recommends a 'one stop' approach which means that the different needs of adolescents can be met under one roof, by a team of professionals who understand their needs and are trained to address them effectively. According to Nath and Garg (2008), school-based services were better utilized than the health facility-based services. This means that locating mental health services (or psychological services) in schools is the best way to provide support to learners.

2.3.1.4 Adolescents' attitude towards seeking help and counselling

The focus of the study is adolescents and whether or not they would voluntarily access help if available. According to Gladding (2000), Gouws *et al.*, (2000) and Tatar (2001) of all developmental phases, adolescence is fraught with developmental challenges and emotional problems. In an explorative study on whether adolescents would seek help from anyone

whenever necessary, Kgole (2004) revealed that there were some reservations on the part of adolescents about consulting professionals. Although, as Kgole (2004) referred to adolescence as a period of emotional storm and stress, and adolescents being prone to mental health disturbances for which they needed to develop coping skills, they nevertheless considered seeking help as the last resort. Problem-focused coping (that is, help-seeking), according to Kgole (2004), is a process involving a series of decisions and is affected by factors such as problem definition, issues of confidentiality, issues of trust and priority. Adolescents sought help only when they believed that they would receive help and, instead of accepting responsibility for causing it, the problem was attributed to external causes.

Kgole's (2004) study moots that the underutilization of professional services by adolescents was related to a negative attitude towards the professionals and preference for using informal sources such as family and friends. According to Kgole (2004), seeking help from professionals such as counsellors can be emotionally costly and threatening, hence adolescents preferred their friends and peers. Friends were preferred above any other source to confide in because they are more supportive, less judgemental and offered valuable advice. Educators, on the other hand, struggled to maintain confidentiality and were judgemental (Kgole, 2004). Seeking help, as Kgole (2004) notes, can buffer one's reaction to stress, leading to better adjustment and fewer emotional and behavioural problems. However, some of the barriers to seeking help were that adolescents felt that defining the problem was too personal, the lack of confidentiality, a preference for handling the problem autonomously and the perception of helplessness. Kgole (2004) states that adolescents' reluctance to seek help was due to 'social reservation'- the feeling that they would be humiliated for seeking help and be viewed as a sign of weakness and shame. Tatar (2001)

calls it the ‘avoidance-avoidance conflict’, a choice between suffering in silence or approaching a stranger and being subjected to the societal stigma. Concerning the cultural context, Kgole (2004) states that help-seeking behaviour was culturally determined as cultural values, norms and expectations influenced and shaped beliefs. Generally people would be more comfortable to seek help from someone who spoke the same language as them and would be more at ease with people of the same cultural background. In this way it would not be likened to ‘stripping oneself naked in front of a total stranger’.

Kgole’s (2004) study also probed “if there was a relationship between adolescents’ help seeking behaviour and the Life Orientation or guidance programme (LOP)”. According to Kgole (2004) learners found school guidance to be inadequate regarding helping them with their personal concerns. This was more so because it was seen as an extra subject, neglected and allocated to educators regardless of relevant qualifications. Van der Riet and Knoetze (2004) describe help seeking as the “process of finding resources to assist in the solving of a problem or concern” (p. 224) and identified self-awareness, affordability, knowledge of resources, confidentiality, stigma and usefulness of therapy as the barriers to help seeking.

Although LOP was compulsory for all learners there was no clear policy directive about how to train educators in its provision (Kgole, 2004). Adolescents – regardless of context and gender – experience similar kinds of problems and interpersonal relationships present the most serious challenges and the family provides a solid anchor for adolescents which determine how they would cope with peer pressure. Learners concerns about confidentiality and fear of being

discussed in staff meetings were some of the reasons behind the underutilization of professionals and more reliance on informal sources.

Concerning adolescents' perception of counselling, adults, in general, believe that adolescents experience turmoil and difficult challenges in the search for and formation of their identity. According to Tatar (2001, p. 214), mental health workers and secondary school educators viewed moodiness, difficulties with interpersonal and family relationships, and confusion and concern about the future as normal aspects of adolescence. As Tatar (2001, p. 214) put it, the 'storm and stress' model is inherent in the transition stage from childhood to adulthood and conflicts between parents and their adolescent children are characteristic of this model. Hence, adolescence is now viewed as a stage in which youngsters repeatedly negotiate their self-identities while confronting their environment. Counsellors embrace two perceptions of adolescence, a deterministic perspective regarding the difficulties adolescents face, and a less rigid view according to which counselling can make a difference in adolescents' lives.

It is widely recognised that a large proportion (estimated at 15-20%) of the adolescent population suffers from a high level of psychological disturbance (Gouws *et al.*, 2000; Tatar, 2001). Moreover, parents of adolescents attribute great importance to adolescents' level of stress as affecting their social and academic functioning. Poor mental health during adolescence has been linked with behaviours that can damage both physical and mental well-being in adulthood (Tatar, 2001). According to Dawson and Singh-Dhesi (2010), a mentally healthy individual can develop psychologically, emotionally and spiritually; initiate, develop and sustain mutually satisfying personal relationships; use and enjoy solitude; become aware of others and empathise with them;

play and learn; develop a sense of right and wrong, and resolve problems and learn from them”. Child mental health, as Lockhat and Van Niekerk (2000) put it, rests on four pillars, namely, a sound physical constitution; a nurturing family; a positive school or apprenticeship; and a supportive, stable and safe community life. According to Sigelman and Rider (2006), “significant mental health problems – real signs of storm and stress – characterise about 20% of adolescents. Moreover, many of these adolescents were maladjusted before they reached puberty and continue to be maladjusted during adulthood”. It is a period of heightened vulnerability to some forms of psychological disorder, with teenagers facing greater stress than children; they must cope with physical maturation, changing brains and cognitive abilities, tribulations of dating, changes in family dynamics, moves to a new and more complex school settings, societal demands to become more responsible and to assume adult roles, and more. Mood swings, risk taking, and conflicts with parents are all common (Sigelman & Rider, 2006).

Research reveals a gap between adolescents’ need for professional help in reducing psychological pressures and their actual rate of approach to psychologists, counsellors and social workers. While some studies report that adolescents are willing to approach a school-based clinic for help (Riggs & Cheng, 1987), others have shown that a relatively small number of adolescents actually seek out, or would be willing to seek out, school counsellors or psychologists when in distress (Friedman, 1991; Kgole, 2004). According to Tatar (2001, p. 214) the dilemma of whether or not to seek help especially from an adult might reflect the ‘avoidance-avoidance’ conflict experienced by an adolescent, which is characterised by the adolescent’s belief that *‘If I do not ask for help I shall continue to suffer and feel discomfort, but if I ask for help I shall pay a personal and societal price for the approach itself’*.

Apparently, one personal factor that might impede adolescents' willingness to approach professional counsellors is that the adolescents themselves harbour feelings of embarrassment. They are inhibited especially by the idea of talking to a stranger about personal matters or to count on him or her to maintain confidentiality. Furthermore, they may avoid approaching counsellors because of the accompanying societal stigma, which might involve them being identified as problematic and unsuccessful. Often, they do not know how to access help, or harbour some cultural mistrust or perceptions that are academic and not personal in nature. Paradoxically - as Tatar (2001, p. 215) notes - adolescents who avoid turning to a counsellor because of the negative stereotype attached to counselling may actually be those who need counselling most. From the above, it is apparent that the images adolescents have of the counsellor seem to be a critical factor underlying counsellors' ability to provide professional service.

In the same vein, Ciarrochi, Deane, Wilson and Rickwood (2002, p. 174) contend that seeking and receiving help from a health professional can assist in the reduction of distressing psychological symptoms, yet few who experience significant psychological distress seek professional help. Mental health disorders are most prevalent among young people, yet very few young people seek professional psychological help; most seek help from a variety of sources such as family members, friends, and educators. According to Ciarrochi *et al.*, (2002, p. 174) there is a relationship between basic emotional competencies (for example, emotion perception, awareness, and management) and people's intention to seek help. Emotional competence in this case is defined as "the ability to identify and describe emotions, the ability to understand

emotions, and the ability to manage emotions in an effective and non-defensive manner” (Ciarrochi *et al.*, 2002). Their research finding was that low emotional competence is associated with lower intention to seek help. Those who are less skilled at managing emotions are less likely to seek help from family and friends for both emotional problems and suicidal ideation. These relationships held even after controlling for hopelessness.

As Mashau *et al.* (2008) puts it, the availability of education support services is a *sine qua non* for the establishment and maintenance of sound, quality, educational relationships between educator and learner. Psychological Services (or education support services) are meant to establish a psychological environment which would simultaneously be conducive to enhancing learners’ mental health and promoting effective teaching and learning.

Based on their needs for Psychological Services, it is thus important for me to investigate whether or not such services are available in schools, and whether and how the services satisfied learners’ needs. However, if services are under-utilised, we must seek ways of making the services accessible and relevant to learners’ needs.

2.3.2 School guidance and learners’ career decision-making skills

As mentioned earlier, career guidance is an important aspect of school psychological services, and provides learners with information about different career paths and skills needed to make a success of them. Bojuwoye and Mbanjwa (2006) conducted a qualitative study focusing on

factors impacting on career choices of technikon students from previously disadvantaged (African) high schools, specifically the factors that influence their career decisions.

According to Bojuwoye and Mbanjwa (2006), participants indicated that their parents had had a significant influence on their career choices and that they felt at ease discussing the issue with their parents, with mothers showing more interest in their children's education than fathers. This result confirms Bojuwoye and Mbanjwa (2006) finding that parents have a huge influence on their children's career choices; and that parental supervision and involvement are best predictors of students' behaviour. Participants chose careers with prestige status and better salary packages so they could live good lives. Most participants of the study wanted to have a better quality of life than their parents. Other factors which have a significant influence on career choices were school subjects, academic performance and educators.

The availability of guidance services, according to Bojuwoye and Mbanjwa (2006), was not rated by respondents as of much significant influence in career decision-making. This contradicts Euvrard's (1996) observation that guidance should make people to see what they want to be in the future. This implies that learners choose the careers in which they are interested and the educators/counsellors are asked to give them more information on these. The findings of this study also indicate that a lack of information (personal and environmental) have a negative influence on career choices. Bojuwoye and Mbanjwa (2006) emphasize the need and importance of career education in South African schools. According to Akhurst and Mkhize (2006) a good school guidance programme has potential to help students acquire personal and environmental information and through counselling, students can be assisted to make appropriate career

decisions. But Akhurst and Mkhize (2006) caution that “contextual factors have an influence on the career development process, and career services should be responsive to the needs of students and their contexts taken into account”. This is confirmed by Euvrard’s (1996) assertion that disadvantaged home circumstances may be related to poor vocational development. In conclusion, Akhurst and Mkhize (2006) recommend that career counsellors in schools and tertiary institutions make an effort to adapt counselling services to suit the socio-cultural contexts of their practices. The goal of career guidance, as Euvrard (1996) notes, is not to give learners answers but to help them ask the right questions.

It is important for School Psychological Services to equip students with the skills to make informed choices regarding employment after finishing high school. Also, Life Orientation– as one of the School Psychological Services – is a learning area that is meant to equip learners with skills to make informed career choices.

2.3.3 School Psychological Services and learners’ academic performance

The rationale behind the introduction of SPS was to promote mental and physical wellness and facilitate learning (DoDea Manual 2946.4, 2001; Elliot & Witt, 1986). This means that it is important for learners to focus on their studies without any psychological or emotional distractions. A study by Brigman and Campbell (2003) evaluated the impact of school-counsellor-led interventions on student academic achievement and school success behaviour using a group counselling and classroom model called Student Success Skills (SSS) which focuses on three skills critical to school success, viz., cognitive, social, and self-management

skills. According to Brigman and Campbell (2003), although they agreed that counsellors are helpful to students and had significant influence on their development, there was insufficient evidence of the positive effects of the counsellor services on student academic achievement and pro-social behaviour. The researchers mooted the need for more school counselling accountability research, especially focusing on student performance. Brigman and Campbell (2003) asserted that in order to improve achievement, the social and emotional dimensions along with the academic need to be addressed. This was echoed by Masten and Coatsworth (1998); Gladding (2000); Thuneberg (2007); and Quinn & Duckworth (2005).

Brigman and Campbell (2003) focused on skills considered as critical to school success which include: (1) cognitive and meta-cognitive skills such as goal-setting, progress monitoring, and memory skills; (2) social skills such as conflict resolution, social problem-solving, listening, and teamwork skills; and (3) self-management skills such as anger management, motivation, and career awareness. These skills were considered to be the most powerful predictors of long-term school success and separated high achievers from low achievers. The skills mentioned here are covered in the Life Orientation curriculum, which is a component of school psychological services. The assumption of Brigman and Campbell's (2003) study was that, "if the school-counsellor-led interventions were effective in helping students improve their behaviour related to cognitive, social, and self-management skills, there would be an improvement in student academic achievement".

The findings of the study, as indicated by Brigman and Campbell (2003), revealed that "the combined school counsellor interventions of group counselling and classroom guidance were

associated with a positive impact on student achievement and behaviour. The fact that the interventions were targeted on specific skills associated with school success and that school counsellors used research-based techniques to teach these critical skills were seen as central to the positive outcome of the study”. A concluding remark by Brigman and Campbell (2003) cautions that there was a growing call for data-driven decision-making by school district leaders which necessitates that counsellors provide evidence that the work they do helps students succeed or else they would be at risk of losing support for their programmes.

2.3.4 School Psychological Services and their impact on issues affecting learners

School psychological services are, amongst other things, meant to equip learners with skills to handle life’s challenges, make informed decisions regarding their wellbeing, and ultimately change their values, norms and behaviour. But the lack thereof creates a vulnerable situation for youth. Studies by Botvin *et al.*, (1990); O’Connor and Britton (2007); Palmer (2002); Greene (2008); Sun and Hui (2007), and so on, focus on social, behavioural and emotional problems, their impact on the well-being of learners and the role the school can play in addressing them. For each of the social problems discussed hereunder researchers suggested school-based intervention strategies in the form of School Psychological Services can ameliorate the situation and promote learners’ well-being.

2.3.4.1 School violence and bullying

The protection of human rights is the mandate of School Psychological Services, especially health promotion. Education is a fundamental human right for each and every child, and is crucial for their development to create enabling environments for them to develop creative talents and critical thinking and inculcating them with social and life skills to grow with dignity, confidence and self-esteem. This means that the safety and security needs of learners need to be addressed if they are to adjust well and succeed academically. According to Article 19 of the U.N. convention on the Rights of Children, children have a fundamental right to feel safe in school and be spared the oppression and repeated intentional humiliation implied in violence and bullying (Olweus, 1999). School environments have constantly been plagued with violence creating unsafe environments for learner development and academic progress. Greene (2008, p.12) defines violence as “intentional form of behaviour in which one person threatens, attempts to harm, or does harm another person, and aggression as a form of low-level violence that includes verbal, physical, or gestural behaviour that is intended to cause minor physical harm, psychological distress, intimidations or to induce fear in another person”.

O'Moore (2005, p. 3) defines bullying and violence as “incidents where an individual or a group are abused, threatened or assaulted, and the abusive behaviour involves an explicit or implicit challenge to their safety”. According to Furlong and Morrison (2000), “school violence is conceptualized as a multifaceted construct that involves both criminal acts and aggression in schools, which inhibit development and learning, as well as harm the school climate”. As Favela (2010) points out, “a definition of bullying should include aggression, intention, repetition and an

imbalance of power between the aggressor and the victim, and can be direct, verbal, indirect or relational, with well-known long-term effects on those involved”. According to Burton and Leoschut (2013), bullying can cause psychological, emotional and/or physical damage on its victims, resulting in a decrease in educational performance as victims battle to focus on content and on school work. Mncube and Harber (2013) describe “structural violence as violence caused by oppressive and unequal socioeconomic and political relationships, creating a very unequal society with many people living in extreme poverty. This creates a dysfunctional schooling system for the majority and a privileged, functional sector serving a minority”.

The school climate, as Greene (2008) points out, “comprises of cultural norms in the school, quality of interpersonal relationships, school policies, and student/staff and administrator feelings and beliefs about their school”. These components were found to be significantly related to levels of victimization and offending in schools. On the other hand, Greene (2008) mooted that “school connectedness was a protective factor for reducing youth violence in general and was predicted by positive classroom management, participation in extracurricular activities, tolerant discipline policies, and school size”. Waters, Cross and Runions (2009, p. 517) define school connectedness as “the extent to which students feel like they are part of the school, and encompasses perceptions that the school supports their academic pursuits, has fair discipline climate and a supportive culture. It is the belief by students that adults in the school care about their learning as well as about them as individuals”.

Greene’s (2008) findings were that “schools in which students felt welcome, schools in which students felt positively connected and engaged, and schools in which students perceived their school rules and policies were fair and consistently enforced, were likely to have lower levels of

aggression and violence and higher rates of respectful behaviour among all key respondents”. This was echoed by Furlong and Morrison (2000) who noted that “schools having low levels of violence tended to have a firm, consistent principalship (leadership) style, tended to be smaller in size, and have lower levels of crowding. Researchers saw schools as logical settings in which to implement programmes for reducing school violence and responding to the varied needs students invariably bring with them”. The school as a physical, educational, and social environment has to embrace violence as an educational problem and allow it to become a topic worthy of classroom and school attention. This view was reinforced by Furlong and Morrison (2000), when they suggested:

“School violence is an important component of the daily lives of children in schools. It affects where they walk, how they dress, where they go and who their friends are. As long as teachers treat violence at arms’ length, as something that is someone else’s problem they will continue to neglect the opportunity to intervene in a crucial aspect of the children’s lives. By ignoring school violence, the name-calling, the shoving, the fighting, the harassment, they are condoning it. Children see the teachers walking by, pretending not to notice, and they learn that the way we treat others, the way we interact on the street or in the playground, is nobody’s business but our own. Teachers must talk about violence, they must recognise it, examine it, dissect it, and let children see and understand its secrets and its sources. Without this examination it remains an ugly secret that society cannot understand or control”
(Furlong and Morrison, 2000: 5).

One school principal recently asked President Jacob Zuma to give them back the power and that if the violence in our schools was not stopped, we would soon be picking up bodies of pupils from the playgrounds (*Sunday Tribune*, August 9, 2009: 1). It was a drastic thing to say but it captures/indicates the calamity of the situation prevailing in our schools nationally. The recent spate of violence, including violence against teachers, is a matter of serious concern which the

nation needs to take a stand against. The premise and argument presented here is that safe and secure school environments makes for better emotional development of learners and better academic performance. Evidently, a programme of Psychological Services should be able address learners' need for safety and security, provide them with mental tools settle squabbles without resorting to violence, conduct anger management classes, and counsel learners who battle to control their emotions. However, as O'Moore (2005) points out, "due to the complexity and multi-faceted nature of bullying and violence individual efforts from schools alone will not be sufficient to counteract theses negative forces'. This means that tackling the issue as something that takes place in a vacuum without cognisance of the contextual factors which influence it would be tantamount to over-simplifying. This requires a commitment of government and stakeholders at all levels of decision-making.

Nevertheless, schools should draw up, implement and monitor a national action plan to prevent bullying and violence. Critical cognisance has to be taken of the human and financial resources available. Common to, and at the heart of all bullying and violence is abusive behaviour, which can be verbal, physical, psychological, sexual and racial. These behaviours can be challenged in prevention and intervention programmes, such as School Psychological Services, where children would not only gain knowledge but also learn about themselves, how to behave and interact well with other children. Importantly, a national strategy is needed to prevent and reduce school bullying and violence. All schools should implement a policy/intervention programme, and as O'Moore (2005, p. 4) put it, "a programme that is underpinned by a political commitment will carry more weight". Intervention should include providing counselling to bullies and victims. The most promising method to prevent bullying in schools is the whole-school approach (*ibid*).

In slight contrast, Samara and Smith (2008) says that for schools to show that they take the issue seriously they need to do something about it. But, intervention efforts should not only target the victims and perpetrators but must take into consideration the contexts that exacerbate or serve as deterrent to aggressive behaviours, including the school itself (Samara & Smith, 2008; Furlong & Morrison, 2000). However, it is important that schools develop and implement an anti-bullying policy, which – amongst other things – will include assertiveness training and peer support. These skills will not only help children learn, but also help to make the whole school a more caring, positive place. As one parent said, you can tell a lot about a child's family the moment he/she steps into the classroom. Furlong and Morrison (2000, p. 80) confirms the statement when they maintain that “children connected and bonded to meaningful adults in their lives and at school are less likely to commit crimes, use substances, and engage in high risk behaviours”. Hence, children's upbringing is the one factor which is the main contributor to these kinds of behaviour as most of the perpetrators of violence are from dysfunctional families. As Oprah Winfrey put it, ‘children are not being properly parented’. In support, Mamphela Ramphela concedes that the root cause of gangsterism, drug abuse and learner violence is a broken social fabric; it starts with absent parents and dysfunctional families, schools and communities (*Sunday Times*, September 28, 2014, p.18).

According to Batsche and Knoff (1994, p. 3), bullying is “intergenerational”, and that the bully at school is a victim at home. Bullies come from homes where parents prefer physical means of discipline, are hostile and rejecting, have poor problem-solving skills and teach their children to strike back at the least provocation. Hence, the need for some introspection as to why parents raise ‘little monsters’ they too are afraid to talk to. Through School Psychological Services

schools can conduct parent training programmes to equip parents with parenting skills and teach them how to communicate with their children, specifically, listen to them without interrupting or giving lecture.

2.3.4.2 Teenage suicide ideation among learners

Suicidal behaviour is a psychological problem which needs School Psychological Services to address it. Wasserman, Cheng, Jiang (2005) identify suicide as the fourth leading cause of death among young (15-19 years) males and the third for young females globally. According to Sun and Hui (2007), in order to understand suicidal ideation among adolescents, their perception and interpretation of their surroundings and their psychological states had to be examined, including scrutinizing psychological risk factors such as hopelessness, depressive symptoms and feelings of worthlessness and family and extra-familial subsystems like parental death, poor parental care, high parental expectation, poor family communication, poor academic achievement and relationship break-ups. Corroborating the above, Ruddell and Curwen (2002), posit that “cognitions of hopelessness are the best predictor of suicide ideation, especially when adolescents believe that living is an endless cycle of emotional pain and distress”. Other warning signs, according to Ruddell and Curwen (2002), are “the history of substance misuse, as drugs and alcohol tend to impair logical thinking, and the family history of suicide which may indicate familiarity with suicide as a problem-solving technique”.

According to Uys (1992) the four major precipitating factors for adolescent suicide attempts are family dysfunction, psychiatric illness in the child, school problems, and family psychiatric

illness. Earlier studies on suicide ideation identified parent-child conflict as one of the main stressors contributing to suicidal ideation and attempt. This was followed by peer victimization (which included teasing, name-calling and fighting) which affected adolescents' social self-esteem, school satisfaction, depressive symptoms and anxiety. Schlebusch (2005a) contends that family dynamics play a contributory role in suicidal behaviour, including family conflicts; marital problems between parents; partner relational problems between teens who are dating; socio-economic pressures and financial problems in the family; inordinate stress; child abuse and sexual abuse, and family psychopathology such as family members' prior suicidal behaviour, substance abuse and other psychological disorders. Sun and Hui (2007) emphasise that understanding the adolescents' concerns, meeting their needs and building up their surrounding support systems were necessary to foster adolescent psychological health.

The findings of the study focus on the family, school, and peers. Adolescents with severe suicidal ideation revealed that they had had frequent conflicts with their parents or guardians who had unrealistic expectations of their children's academic achievements and criticised their poor performance. The futility of not being able to change the situation made them feel helpless and hopeless.

Concerning peer influence, participants indicated having frequent conflicts with their classmates or being victimised which made them feel worthless and depressed and think of suicide as the way of coping. The victimised ones felt that the teasing cannot be avoided, hence, the feeling of helplessness. However, participants preferred turning to their best friends for emotional support

when frustrated by conflicts with parents or classmates as support from friends gave them a sense of worthiness, and they perceived their friends as trustworthy, understanding and caring.

According to Sun and Hui (2007), the school needs to act as a support system through implementing a comprehensive guidance programme. Most adolescents perceive teachers as being able to offer academic advice but unable to provide emotional support (Sun & Hui, 2007). Also they do not think that their relationship with teachers is close enough to disclose personal problems. Adolescents value teacher support especially when they have conflicts with family members. Though based on a very small sample, these findings illustrate that when adolescents are faced with an accumulation of stress, they are more likely to feel depressed and this can lead to suicidal thoughts. Social support is important but, adolescents do not consider their parents as being understanding or responsive to their needs and, as a result, they do not think their families are a potential support system in times of need. According to Sun and Hui (2007), poor parent-child relationships appear to be a factor which may affect the family's ability to act as an effective buffer.

The school can also serve as a buffer against adolescent suicide when teachers demonstrate some initiative in enabling troubled adolescents to disclose their problems. As Sun and Hui (2007) indicated, having a caring and supportive school system through proper implementation of school psychological services and, with close teacher-student and student-student relationships, is vitally important in fostering adolescent psychological health. There should be a psychological programme offering instruction on depression and suicide covering early detection and effective treatment (Palmer, 2002). As studies show, students receiving treatment for depression report

substantial gains in academic performance (CCCSMHP, n.d.). According to Sun and Hui (2007), the findings of the study have implications for the role of school guidance and counselling in reducing adolescents' suicidal risks, promoting support in the adolescents' family, school and peer systems, as well as strengthening the adolescents' resiliency. Counsellors and teachers can create a caring school community by taking an active role in developing a school community, building close and mutually respectful, caring and supportive relationships in the school. Sun and Hui (2007) recommend that teachers invite students to approach them whenever they are in trouble. In this respect, teachers can be equipped with psychological intervention skills (for example, active listening and empathy) to interact with their students. Students identified as having personal or emotional problems should be referred to trained school counsellors, social workers or psychologists. Peer groups can also be used as a resource in suicide prevention as adolescents mostly turn to their friends for help. The family is an important buffer against stress and suicidal ideation. According to Sun and Hui (2007), the school – through parent enrichment programmes – can equip parents and their children with effective and conflict resolution skills, encourage parents to show interest and patience in listening to their children, attend to their feelings and psychological needs and offer guidance and support. Counsellors can help parents to appreciate children for who they are and what they could be, rather than judge them on their academic achievements.

Lastly, adolescents tend to think about suicide as a way to cope with distress. The school should empower their personal strengths via systematic school-based social and emotional learning programmes (for example, Life Orientation) for positive youth development, focusing on appropriate coping skills, positive thinking and stress and emotional management. Such a school

psychological programme needs to highlight that seeking help is one of the effective coping strategies (Sun and Hui, 2007). Sun and Hui's (2007) study suggested that by implementing a comprehensive guidance programme schools would be able to identify and provide help for students who are a suicide risk. This would be accomplished with ease as a previous attempt at suicide is the best predictor that suicide may be contemplated in the future (Ruddell and Curwen, 2002: 370). According to Palmer (2002) and Schlebusch (1990), in order to reduce the high suicide rate, a multidisciplinary approach should be used to develop policies and strategies for the promotion of mental health and prevention of suicide. Logically, as Schlebusch (2005a) puts it, a child and adolescent mental health policy should include a multi-level system with the first tier incorporating schools.

2.3.4.3 Substance abuse as learners' problem

The proliferation of hard and soft drugs in our schools is a matter of serious concern to parents and teachers and other stakeholders, hence it is a psycho-social problem which has a negative impact on learners' wellbeing. According to Botvin *et al.*, (1990) "it is commonplace that experimentation with drugs appears to have become part of the normal rites of passage for many adolescents. The initiation of drug use occurs during adolescence and is the result of a combination of cognitive, attitudinal, social, personality, pharmacologic, and developmental factors". According to O'Connor and Britton (2007), "chronic substance abusers have a history of disruption in their family backgrounds which was also characterized by long-standing maternal rejection. The majority of substance abusers tend to come from areas characterised by low socio-economic levels with high truancy rates, suggests an association between substance

abuse with social deprivation”. The use of psychoactive substances during childhood and adolescence can lead to academic, social, and emotional problems and interfere with normal psychosocial development (Botvin *et al.*, 1990). Botvin *et al.*, (ibid) assert that “the most utilized drug abuse prevention approaches relied on the presentation of factual information concerning the adverse consequences of using drugs, promoting personal growth through experiential classroom activities, or involvement in organised youth activities to provide positive alternatives to drug use”. However, there is some evidence that attempting to dissuade adolescents from using drugs by providing them with factual information concerning the consequences of drug use may actually lead to increased drug use, possibly because such approaches may serve to stimulate curiosity (Botvin *et al.*, 1990). Believing in that position would be tantamount to saying that providing learners with sexuality education makes them less inhibited sexually and increases their promiscuity.

Studies (Botvin *et al.*, 1990; O’Connor & Britton, 2007) reveal that “substance use behaviour, like other behaviours, is learned through a process of modelling and reinforcement and is mediated by intrapersonal factors such as cognitions, attitudes, expectations, and personality. It is promoted and supported by social influences from peers, family members, and the media”. The effective approach to the prevention of substance abuse, as suggested by Botvin *et al.*, (1990) involves: a) teaching domain-specific skills, knowledge, attitudes, and expectations in order to enable adolescents to resist substance use social influences and b) generic personal and social skills to increase overall competence and promote the development of decreased substance use risk. Considering that in circumstances where the home and local community do not provide adequately for the welfare and guidance of young people, especially during adolescence,

treatment is less likely to succeed, O'Connor and Britton (2007) recommended social and life skills training programmes in schools. Life skills education is an important aspect of school psychological services.

2.3.4.4 Learners' emotional problems

The number of learners with psychological problems of varying intensities in schools is ever increasing, exacerbated by socio-economic conditions, academic and health issues. Some of the problems do not need intensive specialist intervention that even teachers can provide the assistance required to solve them. Learners with emotionally depressing or severe and chronic problems are usually referred to specialists outside the school. But there are learners whose problems are less intense and which can be dealt with in an ordinary school setting. Jones's (1975) study on maladjusted children provided a definition of maladjusted children as "those with emotional problems of significant complexity, severity and persistence for whom a local authority would want to incur expenditure to provide 'therapeutic' help". According to Jones (*ibid*), "early life experiences may have serious and lasting effects on development of children, there is an association between delinquency and broken homes, and there is an association between different kinds of upbringing and later personality disorders". With an increasing number of orphaned children and child-headed households mainly due to HIV and AIDS, it is pertinent that schools have programmes in place to buffer the effects thereof. But as revealed in the study (Jones, 1975), there was a wide gap between the needs of children and resources in the community and the guidance clinics were ineffective to meet their needs. Also the institutional

guidance services were criticised for being in the first place, expensive and wasteful of resources, and for being so medically orientated that they resist change.

The school-based intervention plans recommended by Jones (1975) included “pastoral care (counselling) by teachers for children whose problems do not justify referral to a specialist, the provision of pastoral counselling by trained counsellors for children who needed more help than can be given by class teachers, and through the provision of specialised units (for example, remedial classes) in secondary and primary schools for children who needed more help than teachers and counsellors could offer and who do not need to be removed from their schools or homes”. Participation of children in these activities required parents’ consent and cooperation either on a full-time or part-time basis depending on the nature of the child’s problems. The school-based inter-disciplinary team, according to Jones (1975), consists of the primary team which is made up of teachers and counsellors, and the secondary support team which includes the social worker, the educational psychologist, and the psychiatrist. The social worker provided the professional link with the child’s home; the educational psychologist visited the school on a weekly basis to discuss current problems, interviewed parents and assessed children where necessary.

According to Jones (1975), the tripartite model of management requires the following changes in the present services for emotionally disturbed children: first, teachers need to become more aware of the social and emotional factors in a child’s development that affect learning in school. Teaching must embrace the notion of caring, the school curriculum must allow for caring work to be done by teachers and teachers must be supported by other members of staff and experts

outside the school. Secondly, schools should have a member of staff designated to develop and co-ordinate 'therapeutic' education, this could be the school counsellor. As Jones (ibid) says, teachers have to become child-orientated and focus on problems which are specific to the classroom. It is true that the child's problems may find expression in the classroom and effective management involves both the child and his/her family. Teachers, counsellors and psychologists should not antagonise each other but work together for the sake of the child with problems. Jones's (1975) tripartite model aims to cover all children in ordinary schools: it recognises that emotional problems arise from multi-factorial causes; that they create multi-variable problems and symptoms; that the only satisfactory form of treatment derives from a truly multi-disciplinary approach. It requires that we become sensitive to the emotional difficulties in children as soon as they start school and recognise that many of the problems we see in school have their beginnings outside the school. Lastly, according to Jones (1975), for a better understanding of maladjustment we need to change from a medical model to an ecological model, which focuses on prevention rather than crisis-intervention and serves the needs of all children and not just of the pathological few.

The review of sources indicated above attests to the importance of Psychological Services in promoting learners' well-being. The inception of an effective programme of psychological services would implement intervention strategies to address issues such as violence in schools, the abuse of drugs by learners, emotional problems, and learners' depression and suicidal behaviour.

2.3.4.5 HIV and AIDS as a learners' health concern

Health issues tend to affect learners' psychological wellbeing and academic performance and in order for learners to achieve their potential, they must be (physically and mentally) healthy, attentive and emotionally secure. De Lange, Greyling and Leslie (2005) attempted to determine the perceptions of senior phase educators regarding HIV and AIDS and its impact on the holistic development of adolescent learners within their ecosystems. According to the findings of this study, participants have an awareness of the prevalence of HIV/AIDS while others seem unaware or perturbed by its existence. Educators expressed that it was a killer disease, with an ever-increasing infection rate and that it has the potential to decimate communities. Educators are also aware of the fact that HIV and AIDS is incurable, cannot be seen with naked eye and leads to the weakening of the immune system, indicating the medical understanding of the disease. Participants expressed their viewpoints about the factors which cause the spreading of the disease, such as people's attitudes, ignorance, and the consequent unchanging of sexual habits.

According to De Lange *et al.*, (2005) there are a number of causal factors contributing to the spread of HIV and AIDS: poverty, migrant labour, failure to practice safe sex, the low status of women, having many sexual partners and the parents' inability to discuss sexual matters with children. Educators indicated that HIV and AIDS causes deep-rooted feelings - including hopelessness - within individuals infected or affected by the disease, which should be dealt with by professional counsellors. Calls for government intervention in the form of legislation and policy statements were expressed by participants. Political leadership, support, commitment and advocacy are – according to participants – what we need to win the war against HIV and AIDS.

Participants felt that self-discipline and good morals have a role to play in the prevention of HIV and AIDS.

According to De Lange *et al.* (2005) participants felt that HIV and AIDS lead to the physical deterioration of the adolescent as well as affecting adolescents' mental health. Adolescents infected with HIV and AIDS become depressed and traumatised mainly because they feel that their situation cannot improve. The stigma that infected or affected individuals experience leads to feelings of powerlessness, confusion as well as self-blame. Suicide ideation is common when individuals are in this state. Socially – as participants indicated – infected or affected individuals feel like outcasts, exacerbating social isolation. The disease also affects families' stability when a family member is affected or infected. According to De Lange *et al.* (2005), during adolescence the peer group provides individuals with a sense of belonging. The care, support and acceptance from friends are very important at this stage. HIV and AIDS also impact on the scholastic performance of infected or affected individuals due to poor health, absenteeism and irregular school attendance. De Lange *et al.*, (2005) recommended that “education provides adolescent learners with information, strengthen their ability to cope with personal and family infection, and - in the event of an HIV and AIDS related death – help them cope with grief and loss. Education can create conditions for the reduction of poverty, personal empowerment, gender equality and female economic independence”. Lastly, De Lange *et al.* (2005) mooted “the need of counselling by educators to address the emotional and psychological needs of adolescents dealing with trauma and grief for the loss of a relative”. This is in harmony with Naledi Pandor's (2008) assertion that the department of education has set up school-based counselling and support services for learners that are affected or infected by HIV and AIDS. In this respect, educators

would need in-service training to identify and provide support to learners infected with HIV and affected by AIDS.

An increase in the rate of HIV and AIDS infection was attributed - in part - to the lack of Psychological Services in schools, according to the findings of the current study. The availability of School Psychological Services would provide learners with emotional support to cope with and overcome feelings of hopelessness, depression and trauma associated with HIV and AIDS infection. Some of the infected learners got the virus from rape and often experience flashbacks, hence, the need for counselling and other forms of therapeutic interventions, for example, behaviour modification and cognitive-behavioural therapy (CBT).

2.3.5 The importance of supportive relationships

According to McHugh, Horner, Colditz and Wallace (2013, p. 12), “all humans have a fundamental drive to satisfy the basic need to belong through persistent, positive, caring relationships”. This presupposes that there is a link between learners’ mental health or well-being and social support. In other words, both environmental and personal components of school social ecology are equally influential for academic and health outcomes (Waters, Cross & Runions, 2009). According to Bronfenbrenner (1979), the human ecological theory pointed out that adolescent development is interlocked with their surroundings, and thus adolescents are troubled if there is a lack of balance within the systems. Hence, all psychological interventions, including counselling, are focused on ameliorating emotional pain and discomfort and creating optimism in the face of adversity. Gibson and Mitchell (2003) define counselling as a helping relationship,

based on factors such as positive regard and respect, accurate empathy, and genuineness. It is important that the relationship meet, insofar as possible, client needs and within this relationship the client has to assume responsibility for his/her problem and its solution. It is a relationship which determines whether or not the client would continue with therapy to his/her benefit.

According to Gouws *et al.*, (2000), among the most critical development tasks that have to be performed by adolescents are those of socialisation, finding their place in society, acquiring interpersonal skills, cultivating tolerance for personal and cultural differences, and developing self-confidence. The awesome power of relationships is demonstrated by Brendtro, Brokenleg, and Van Bockern (1990)'s assertion that "the quality of human relationships in schools and youth services are more influential than the specific techniques or interventions employed". Counsellors and educators can be successful if they develop a positive counselling and classroom climate respectively.

McHugh *et al.*, (2013) maintain that humans are driven to satiate three innate needs, namely, the need for *autonomy* or a sense of personal control and direction, the need for *competence* or a sense of efficacy within a context, and a need for *relatedness* or quality interpersonal connection. In support, Bernard and Slade (2009, p. 355) posit that "successful development in any human system is dependent on the quality of the relationships, beliefs, and opportunities for participation in that system". The relationships that would make it possible for adolescents to satisfy their needs and consequently achieve their developmental tasks are their relationships with parents, friends, peers, educators, counsellors and the community. However, these relationships can be the cause of depression amongst adolescents. Social relationships –

including relationships with both professional and nonprofessional helpers – have a huge impact on the development of adolescents, as discussed below:

2.3.5.1 Relationship with parents

Adolescents, as Kazdin (1993) put it, are dependent on living conditions of their parents and families and hence are vulnerable to the impact of conditions well beyond their control. According to Brendtro *et al.*, (1990), attachment is a powerful universal need in humans and is characterised by the persistent effort to reach out and establish a secure relationship with others. Therefore, the development of trust between a child and his/her world is the first stage of psychosocial development. Consistency, continuity, and sameness of experience foster trust between child and parent as the child learns to see the world as safe and dependable. As the child grows older, a trusting relationship with parents is generalised to relationships with other adults such as relatives, teachers and neighbours. Competence in dealing with this is necessary for a child's successful adjustment. However, when care of the child by the adult is inadequate, inconsistent, or negative, a disturbed relationship may result (Cohen & Fish, 1993). Thus, Kazdin (1993) speaks about at-risk children such as those who leave home without parental consent (runaways) and those who are thrown out of their homes (throwaways), victims of physical and sexual abuse, neglected children, children of divorced parents and those born to unwed mothers. Studies on relationships indicate that a stable loving relationship with parents enables the adolescent to have confidence to venture outside and be independent (Sigelman & Rider, 2006; Tatar, 2001).

Bostik and Everall (2007) posit that “the development of caring and supportive relationships with one or both parents facilitated adolescents’ process of healing as it promoted communication, care and support. Unconditional love, care and support facilitated the development of feeling important and valued, increases self-confidence, and alters feelings of alienation and personal inadequacy”.

Family relationships are especially important for children. According to Gouws *et al.*, (2000), adolescents’ relationships with parents should be founded on parental interest, understanding, acceptance and approval, trust, discipline and guidance and provision of a happy home. Open communication between adolescents and their parents is important for a positive parent-adolescent relationship. The pursuit of independence by adolescents mean that they must be allowed to make independent decisions and accept responsibility and parents must provide them with the platform to do so. Parents need to understand the things that make life challenging for teenagers, to become more deft at guiding them through their formative years. Failure to do so has potential to cause serious psychological disharmony as most adolescents turn to parents for advice when experiencing problems.

2.3.5.2 Relationship with friends and peers

As Cohen and Fish (1993) indicate, the development of social competence is critical to the successful adjustment of all children and adolescents. Most often children acquire relationship skills from their interactions with one another; adults also may play an important role in facilitating these interactions. Social skills are not only important for the social-emotional

development of children but also for their academic performance. Peer acceptance and friendships are widely regarded as measures of positive social relations. There is considerable evidence that children who experience difficulties with peer relationships tend to have low self-esteem, problems adjusting to the classroom environment, and poorer academic performance. Furthermore, they appear to be at risk for serious future problems during adolescence and adulthood. Thus, disturbed peer relations provide a signal to school professionals of youngsters at risk for short- and long-term problems.

According to Bostik and Everall (2007), adolescents' relations with peers and friends are highly significant for self-concept formation and self-actualisation. Many teenagers actively seek out connections with a peer group that provides them with a sense of companionship, belonging and emotional support. Hence they share a great deal of their lives with the peer group, amongst other things, discussing confidential matters that cannot be shared with parents, and using them as a sounding board for their ideas, thoughts and concerns (Gouws *et al.*, 2000). The peer group plays a crucial role in their socialisation as it performs distinguishable functions such as emancipation, search for an individual identity, social acceptability and support, serving as reference and experimentation base, social mobility, competition, recreation and conformity (Gouws *et al.*, 2000). One of the hallmarks of adolescence is the formation of romantic relationships. According to Bostik and Everall (2007) group involvement provides teenagers with opportunities to socialise, meet others with similar interests, and gain a sense of belonging. The care, patience, and understanding provided by peers, friends and a romantic partner can be an important source of comfort, even for suicidal adolescents.

2.3.5.3 Relationship with counsellor/educator

The school counsellor is a certified educator or an LO educator who addresses the needs of learners comprehensively through the implementation of a counselling programme. As specialists in human behaviour and relationships that provide assistance to students, counsellors work with all learners including those who are considered “at risk” and those with special needs. As Gillis (1996) puts it, “meaningful change and help takes place best when working within the framework of warm, accepting and empathic relationship. This serves to encourage those seeking help to express themselves more freely and foster their natural tendency to move towards positive growth and change”. It is thus important for counsellors and their clients to establish rapport – a counselling relationship based on trust – and afford support. This would enable the counsellor to communicate understanding, sincerity and acceptance (Gillis, 1996). The educator/counsellor’s role of support service – according to Donald *et al.*, (2002) – includes a health-promotive and a curative orientation which involves creating and supporting a healthy and inclusive classroom environment. McHugh *et al.*, (2013) calls it authentic caring, a genuine consideration of the person being cared for and their capacities. One female student succinctly stated “The ones that do know you care more” (McHugh *et al.*, 2013, p. 20). This means that he or she should be able to identify and address barriers to learning, which includes helping those students experiencing barriers to learning. In this way the educator or counsellor would benefit all students in his/her class, irrespective of their age, grade, sex, aptitude, religion, culture and socio-economic status. As one female student, describing the importance and value of teachers’ efforts to reach out and connect with them, succinctly stated “the ones that do know you care

more”. The relationship between a learner and a supportive teacher can be a catalyst for his/her recovery from adversity (Gilligan, 1998).

As apparent from the above discussions, the presence of one validating relationship can serve as a catalyst for the development of additional meaningful relationships which can decrease an adolescent’s fear of rejection, and facilitate increased risk taking necessary to establish new relationships and a reliable support system.

2.4 Conclusion

A literature review is about getting thorough background knowledge – from existing bodies of knowledge, of the phenomenon under review, which is School Psychological Services. In this chapter, I have attempted to provide a definition of School Psychological Services (including Guidance and Counselling services), and gave a description of the different activities and services of a School Psychological Services programme, and how – either through their goals, the basis for offering them or the services they provide – they constitute School Psychological Services. I also traced South African policy initiatives which inform School Psychological Services, unpacked the history of guidance and counselling locally and internationally, discussed the evolution of Life Orientation (c.f. 2.5.1.2), and investigated the impact of psychological services on learners’ general well-being.

Researchers have to constantly ponder over the theoretical framework underpinning their investigation. The next chapter unravels the web of theories relevant to the study.

CHAPTER THREE

CONCEPTUAL AND THEORETICAL FRAMEWORKS

*The essence of a good teacher is her belief in the ability of her learners to succeed
(McLrath, cited in Picton, 1997)*

3.1 Introduction

The focus of the study is to investigate the experiences of learners, school counsellors, and principals of the provision of Psychological Services in secondary schools. It is guided by one primary research question which is:

- What are participants' (viz., learners, school counsellors, educators and principals) experiences of School Psychological Services provisioning in selected secondary schools in Kwazulu-Natal?

The sub-questions which underpin the above research question are:

- a) What are participants' (viz., learners, school counsellors, educators and principals) understandings of Psychological Services and their impact on learners' well-being and academic performance?
- b) What are learners' needs for School Psychological Services as identified by participants (viz., learners, school counsellors, educators and principals)?
- c) What is the current status of Psychological Services (including the various forms of School Psychological Services and resources) in the selected secondary schools?
- d) What are the challenges or obstacles to the effective implementation of Psychological Services in the selected schools?

Conceptual frameworks, specifically Health Promoting Schools, begin this chapter. This is followed by the theoretical bases for this study, namely, constructivism and ecosystemic

theories. The two theories are deemed relevant to understand learners and school counsellors' voices or perceptions of School Psychological Services. First, a discussion of the assumptions underlying School Psychological Services is presented followed by a discussion of the nature of adolescents necessitating their needs for Psychological Services.

3.2 Conceptual frameworks

This section is about the explanation of the concepts 'Health Promoting Schools', 'School Psychological Services', different forms of Psychological Services, as well as the principles of and approaches to Psychological Services.

De Vos *et al.*, (2002: 29) defines a concept as the terms designating those aspects of the world that constitutes the subject matter of a given scientific discipline about which science tries to make sense. According to Berg (2007: 20) concepts are the basic building blocks of theory and are symbolic or abstract elements representing objects, properties, or features of objects, processes, or phenomenon. Concepts are important because they are the foundation of communication and thought. They provide a means for people to make others know what they are thinking and allow information to be shared (Berg, 2007). A concept is a category of perceptions or experiences, and conceptualisation – according to De Vos *et al.*, (2002) – is the process of categorising and labelling our perceptions or experiences. De Vos *et al.*, (2002) describe conceptualisation as the process of taking a construct or concept and refining it by giving it a conceptual or theoretical definition.

Leshem and Trafford (2007), on the other hand, define conceptual framework as the current version of the researcher's map of the territory being investigated, a structure for organising and supporting ideas, whereas a concept map as a picture of the territory one wants to study. A concept provides a set of general signposts for the researcher in their contact with a field of study. For a better understanding of the two foundations of communication and thought, they will be discussed below:

3.2.1 The Concept of 'Health Promoting Schools'

The South African Government as signatory to the United Nations Convention on the Rights of the Child has pledged to "put children first", which is a commitment to ensure that the rights of children are upheld and provision is made to enable all children to reach their full potential (Departments of Health & Basic Education, 2012). This presupposes the need for the development of relevant psychology for the poor, marginalised and most vulnerable, which would play an active role in implementing approaches and methods that contribute to the well-being of individuals and communities, and endorse a commitment to community-based prevention of factors that place youth at risk (Johnson & Lazarus, 2003). Education can achieve this by promoting effective teaching and learning and simultaneously focusing on addressing barriers to learning. There is a growing interest in the relationship between community and public health and, according to Pretorious-Heuchert and Ahmed (2001), in the South African context community psychology aims to facilitate the process of social change and improve the well-being of all citizens. The World Health Organisation (WHO, 1993, p. 1) says "the health promoting school aims at achieving healthy lifestyles for the total school population by

developing supportive environments conducive to the promotion of health. It offers opportunities for, and requires commitments to, the provision of a safe and health-enhancing social and physical environment”. Health is defined as overall well-being which includes physical, social, psychological, spiritual and environmental health (Department of Health, 2000), whereas a school health programme is seen as a combination of services ensuring the physical, mental and social well-being of learners so as to maximise their learning capabilities (Departments of Health & Education, 2012).

According to Johnson and Lazarus (2003), health promotion is an empowering framework that believes in providing individuals with skills necessary to make informed decisions regarding their well-being, which recognises the impact of external social and political influences on behaviour. This includes educational, political, economic, environmental, psychological and medical strategies designed to reduce disease and promote health. Vergnani, Filsher, Lazarus, Reddy and James (1998) maintain that school health education and promotion can play a role in changing not only knowledge and attitudes, but also behaviour. By targeting youth, one can reach them before they have established behaviour patterns that place them at risk for adverse consequences in terms of mental and physical well-being (WHO, 1992). According to Dryfoos (1991) South African youth, many of whom have been historically marginalised and disadvantaged, are at risk for the consequences of ‘new morbidities’ resulting from early and/or unprotected sex, drug and alcohol misuse, stress and various forms of violence, including high rates of exposure to political violence. This means that school health promotion must coordinate and monitor services aimed at youth, in particular campaigns to combat substance abuse, teenage parenthood and sexually transmitted diseases amongst the youth. The need to improve the health

status of South African youth and children is a major priority, and considering the large number of children who can be reached via the education system, schools are considered a logical venue for trying to address some of these problems. In an atmosphere where school health services are fragmented and inadequate, occupy low status and lack resources, with minimal community participation and partnership, the key purpose of the health promoting school is the provision of adequate school health services. This presupposed the adoption of a 'whole school' approach to planning and delivering positive and comprehensive activities, programmes, policies and environments.

The rationale behind the development of health promoting schools – according to the World Health Organization (2000) – is the belief that “children are the most important natural resource and must be at the heart of development, and that their well-being, capabilities, knowledge and energy will determine the future of villages, cities and nations around the world” (WHO, 2000, p. 1). South Africa developed the national guidelines for the development of health promoting schools in October 2000 and has implemented the concept in an attempt to address the historical imbalances and its consequences (Department of Health, 2000). The guidelines are congruent with the policy of inclusive education. According to Johnson and Lazarus (2003), the recognition of the school as a key setting for intervention has led to a focus on the development of health promoting schools as a means of addressing many of the inadequacies and inequalities of the health and educational support services. Unlike the traditional approach which prescribed a didactic, directive style aiming to change behaviour to avoid disease, this approach looks at much more than just curing; it's a democratic process that aims to develop young people's competencies in understanding and influencing lifestyles as well as living conditions (Barnekow,

Buijs, Clift, Jensen, Paulus, Rivett & Young, 2006). However, to achieve health promotion through schools, health education as part of lifeskills education should become part of the curriculum at both primary and high school levels, with a coordinator at each school, logically, the guidance teacher. Lifeskills education encompasses the teaching of not only skills but insight, awareness, knowledge, values, attitudes, and qualities that are necessary to empower individuals and their communities to cope successfully with life and its challenges. However, it must be remembered, as Vergnani *et al.*, (1998) caution, that health promotion is a broader concept than just lifeskills.

The need for school-based assistance for teachers and learners led to the establishment of institution-base support teams called Teacher Support Teams (TST), which focuses on assisting teachers with the management of learners with special needs. The TST's helps teachers deal with problems by themselves, and referrals are limited to cases the school-based team cannot deal with. The health promotion project (*Appendix Q*) resulted in schools operating in a holistic manner in addressing the needs of learners by mainly encouraging them to pursue the development of their physical, psychological, social and educational potential. This was achieved by promoting and enhancing their self-esteem and promoting positive relationships amongst all members of the school community. According to Johnson and Lazarus (2003), through health promotion schools can provide a holistic and comprehensive approach to dealing with difficulties and promoting learners' well-being. This requires adopting an eco-systemic view whereby difficulties which are manifested are understood not only in terms of the individual but the environment as well. This means that intervention entails the transformation of the individual as well as the school environment and all its constituents.

As Johnson and Lazarus (2003) point out, the health promoting school is a strategy for promoting the well-being of members of the school and surrounding community. The driving force behind the development of health promoting schools is the belief that in every community, children are the most important natural resource and must be at the heart of development and that their wellbeing, knowledge and energy will determine the future of villages and communities. This is in perfect unison to the mental health model which considers the social aspects of health, including lifestyle, socioeconomic status, and preventive education (Strein *et al.*, 2003). The central characteristic of the public health model, which distinguishes it from the ‘medical model’, is its emphasis on prevention as well as treatment (*ibid*). Despite extreme personal and systemic stress and enormous challenges such as poverty and HIV and AIDS threatening the lives of teachers, parents and learners, the importance of the school and education as a symbol of hope in impoverished communities cannot be underestimated. According to Strein *et al.*, (2003, p.24) schools are not merely an adjunct to the mental health delivery system, but are the primary providers of mental health services for children – the de facto mental health system for children. Proponents of the mental health model recommend that mental health be redefined as an integral component of primary health, not as just an adjunct or an afterthought (Strein *et al.*, 2003).

All members of the school community unite in providing the best possible learning environment for the children in order that they may rise above their circumstances and realise their dreams. According to the UNICEF declaration, “through education children gain knowledge and skills to survive, to learn, to live dignified lives and to contribute to the development of their communities and their nation”. But, as Vergnani *et al.*, (1998) put it, the policy of health

promoting schools can only be successfully implemented if it is accompanied by the allocation of adequate resources in the form of finances, person power and skills. Achieving this would pave the way for providing a healthier future for South African children. Vergnani *et al.*, (ibid) maintain that in order to develop health promoting schools, inter-sectoral collaboration is essential. This should be understood as collaboration of people from different disciplines, sectors and government departments – as ‘partners’ in education. Health promotion resulted in schools operating in a holistic manner in addressing the needs of the learners. Together with educators, social workers, counsellors and school community, school health services should ensure that orphans and other vulnerable children are identified and referred appropriately to psycho-social support services (Departments of Health & Basic Education, 2012). This would combat the prevalent fragmentation, territoriality and duplication of services, which, among other things, impact on the delivery of School Psychological Services.

3.3 Theoretical approaches to the study

Theoretical models of human behaviour influence how psychologists and educators view and interact with children. As such, the study is informed by two theories, namely, the constructivist theory and the ecoystemic perspective. Based on Gladding’s (2000) assertion that theory is the *why* behind the *how* of Psychological Services, I hope that these theories will explain the phenomenon of School Psychological Services and provide the basis for practice.

3.3.1. Constructivism and social constructivism

Constructivism is relevant to this study because it sheds some light into how young people – with support from significant others – make sense of the myriad of challenges and opportunities around them. Hence, the study is anchored in a constructivist (that is post-modernist) paradigm according to which reality is socially constructed. Rather than a single objective reality, there are multiple realities, each related to the complexity of naturally occurring behaviour, characterized by the perspectives of the participants (McMillan, 2000). The reality that is spoken about in this case is experiential reality, the anecdotal experience of subjects. Reality, according to the constructivist point of view, is presented as an array of possibilities, choices and consequences. Gautama Buddha, a constructivist, emphasized the role we play in who we are and how we find our world. “We are what we think. All that we are arises with our thoughts. With our thoughts we make the world” (Mahoney, 2005). According to Mazzotti (2008) “constructivism refers to the notion according to which knowledge results from a process based on mental operations or judgements, or the capacity of judgement”. This ideology grants the mind an active role in giving form to experience. The mind is not merely appropriative; it is also assimilative and constructive. Donald *et al.*, (1997) emphasise that knowledge is a social construction which is developed and learned through social interaction. As Donald *et al.*, (2002) state, people are seen as shaped by – and as active shapers of – their social context. Importantly, School Psychological Services are all about helping young people construct their world and be able to handle issues and challenges confronting them.

The constructivist perspective, as Mahoney and Lyddon (1988) put it, is founded on the idea that humans actively create and construe their personal realities. Its basic assertion is that each individual creates his/her own representational model of the world. This experiential scaffolding of structural relations in turn becomes a framework from which the individual orders and assigns meaning to the new experience. Central to the constructivist formulations is the idea that, rather than being a sort of template through which on-going experience is filtered, the representational model actively creates and constrains new experience and thus determines what the individual will perceive as “reality” (Mahoney & Lyddon, 1988, p. 200). According to Creswell and Miller (2000) constructivists believe in pluralistic, interpretive, open-ended and contextualised (e.g., sensitive to place and situation) perspectives toward reality. Learners, through School Psychological Services, are given the tools to create their own reality and personalise their own experiences, with support from specialists.

Constructivism views the living system (that is: human being) as a proactive agent that participates in its own life dynamics, not a passive conduit of energies, forces, and masses that are moved or modified only by being impacted by other external entities. “An active and motivated organism is one that remains engaged with the challenges of life and the developmental opportunities that those challenges present. Learned optimism, learned resourcefulness, and hope, for example, are expressions of such engagement” (Mahoney, 2005, p. 747). The paradigm is relevant in the sense that Psychological Services are needed to support young people as they navigate through life, grapple with reality (that is: subjective reality) in their journey to self-discovery, and in the process help them shape their identities. It is meant to equip youth with skills to engage actively with life and its challenges and participate in active

and interactive self-organizing processes. Constructivism is about the way people search for meaning, truth and untruths and make sense of it all. According to Donald *et al.* (1997, p. 41) “as human beings, learners cannot be understood as objects which are passively influenced by the forces around them, they are active agents who are constantly making meaning of their lives within and through their social context”. Hence the nature of the study is primarily qualitative, looking at how learners grapple with challenges and make sense of the world around them utilising various aspects of Psychological Services, with support from counsellors, educators and parents.

Dixon-Krause (1996) posit that “the constructivist movement has grown essentially from dissatisfaction with educational methods where rote memorisation, regurgitation of facts and the division of knowledge into different subjects, led to a situation where learners were not necessarily able to apply what they have learned in real life”. Knowledge should influence behavioural changes and an individual’s capacity to handle real life problems, which is the basis for School Psychological Services. Constructivism is the philosophy or point of view that “people actively construct new knowledge as they interact with their environment” (MoodleDocs, 2008, p. 1). According to Slezak (2007) the main underlying assumption of constructivism is that individuals are actively involved right from birth in constructing personal meaning that is their own personal understanding from their experiences.

Constructivism maintains that human self-organizing activities are embedded in social and symbolic contexts. According to Roeser *et al.*, (1998), learners’ construction of meaning within different learning environments is the key mediator between the actual context and their beliefs,

affect, and behaviour within that context. This individual-level meaning-making process often occurs in relation to how well the learning environment provides opportunities for the child to develop a positive sense of personal competence and autonomy and positive relationships with teachers. To the extent that school is experienced by the child as supporting these needs, their academic engagement, achievement, and mental health will be enhanced.

We live in and form relationships with other human beings. The self – although uniquely personal and largely ‘self-centred’ – is always socially embedded. Personal identities – the experience of who one is, what one is capable of, and personal growth – develop within human relationships (Mahoney, 2005). Concurring with Mahoney (2005), Donald *et al.*, (2002) asserted that “how we think, feel, behave, and develop as persons are linked to the social structures, forces, and relationships that make up our environment”. Changes of the self develop within such relationships: relationship with parents, family, friends, teachers, and in this case, therapists and school counsellors.

Social constructivism, as framework in which the study is located, is according to Slezak (2007), a sociological theory of knowledge that considers how social phenomena develop in particular social contexts. Within the constructionist thought, a social construction (social construct) is a concept or practice which may appear to be natural and obvious to those who accept it, but in reality is an invention or artefact of a particular culture or society. Social constructivism, as Mazzotti (2008) puts it, takes phenomenology as a base to state that research should consider the meanings and intentions held by the social actors and in order to accomplish this, the researcher should approach the social groups putting ‘in parenthesis’ his/her beliefs and values. Reality is

multiple and the researcher must begin his transactions with the participants in a most neutral way.

Donald *et al.*, (2002) aver that the social construction of knowledge involves the construction and transmission of values, information, and ways of understanding through processes of social interaction” (Donald *et al.*, 2002:104). Slezak (2007) adds that, rather than the transmission of knowledge, learning is an internal process of interpretation: learners do not transfer knowledge from the external world into their memories, rather they create interpretations of the world based upon their past experiences and their interactions in the world. Hence, Rose, Loewenthal and Greenwood (2005, p. 444) define learning as the process of making new or revised interpretations of meaning of an experience which guides subsequent understanding, appreciation and action”. Kim (2001) says that social constructivism emphasises the importance of culture and context in understanding what occurs in society and constructing knowledge based on this understanding. According to Donald *et al.*, (2002, p. 104), mediation and scaffolding are important tools in the construction of knowledge. It is for this reason that central to any School Psychological Services programme is the counsellor who engages learners and assists them in co-constructing their world, their reality. A School Psychological Services programme is essentially about helping learners create meaning through their interactions with the society and the environment they live in, invent and create their own reality from the things around them (Kim, 2001).

As Kim (2001) states, meaningful learning occurs when individuals are engaged in social activities. The contrast between social constructivism and social learning theory is that it stresses

interaction over observation. Learners, teachers and school counsellors participate to co-construct Psychological Services for their own mutual benefit. Their interaction creates Psychological Services, and Psychological Services are about the interaction of individuals as social actors for the benefit of a learner. Through Psychological Services, learners “are actively engaged in building progressively more complex understanding of their world” (Donald *et al.*, 2002, p. 100). Psychological development cannot take place in a vacuum. Clarke and Jenner (2006) compare social construction with discourse psychology because discourse is the primary driver and cognitive structures play an important role, and also language and social interactions are central processes in learning and change. The main drawback with social constructivism, according to Mazzotti (2008, p. 25), is that the multiplicity of possible interpretations about an object prevents objectivity because “realities exists in the form of multiple mental constructions, socially and experientially based, local and specific, dependent, for their form and content, on the persons who hold them”. This means that a single reality can have a multitude of interpretations, and for the researcher there is danger of seeing what he/she wants to see.

3.3.2 The ecosystemic theory

School Psychological Services (*viz.* Guidance and Counselling), are concerned with understanding individuals in relation to their social context, which in this case includes the home, family, school and the wider community and how these contexts influence their world view. It is derived from a blending of the ecological perspective, according to which all living organisms depend on the interchange with their environment for survival and growth, and systemic approach, which understands human behaviour in terms of relationships, how a whole is made of

interrelated parts, and how one part of the system affects other parts of that system (Weiss, Coll, Mayeda, Mascarenas, Lawlor & Debraber, 2012). This means that the theory focuses on the child's development within the context of the system of relationships that form his or her environment. The relationship between human development, behaviour and the social environment is important for individuals' survival. In their quest for knowledge, an individual construct, young people are constantly bombarded by social ills or forces such as poverty, unemployment, HIV and AIDS, substance abuse, teenage pregnancy, domestic violence, learner-on-learner violence and so on, and they have to make sense of it all and in the process shape their own destinies. Psychological services have to mitigate the cumulative impact of these factors on learners' well-being. Social constructivist theory maintains that youth and whatever behaviours they exhibit are products of the society they belong to. Hence both the ecosystemic and the constructivist perspectives are important. Traditionally, according to Dawson and Singh-Dhesi (2010), the practice of educational psychology in schools tended to have a narrow view of the child, disregarding the fact that he/she exists in the contexts of home, school and community. For school counsellors and/or psychologists to effectively and most completely understand and help the child, he or she needs to understand the child in these contexts. This would enable school counsellors/ psychologists to be more proactive rather than reactive, as Terjesen, Jacofsky, Froh and DiGiuseppe (2004) maintain, to get to the root cause of an issue rather than deal with its symptoms.

According to the ecosystemic view, human beings are in the social context linked in dynamic, interdependent, and interacting relationships (Donald *et al.*, 2002), as depicted in Figure 3.1. The theory has, according to Paquette and Ryan (2001), "recently been the renamed 'Bio-ecological

Systems Theory' to emphasise that a child's own biology is the primary environment fuelling his/her development. There is interdependence and relationships between organisms and their physical environment". The relationships are seen as a whole with each part as important as each other in sustaining the cycles of birth and death, which ensure the survival of the whole system. The notion of balance is a central ecological concept, and ecological balance occurs when the relationships and cycles within the whole are in balance or in a state of equilibrium, thereby sustaining the system. As Marais and Meier (2010) put it, a system is a group of interrelated, interdependent and interacting elements that form a coherent whole. When there is a major discord or disturbance, the relationships and interdependence may become so distorted that recovery as a whole is threatened.

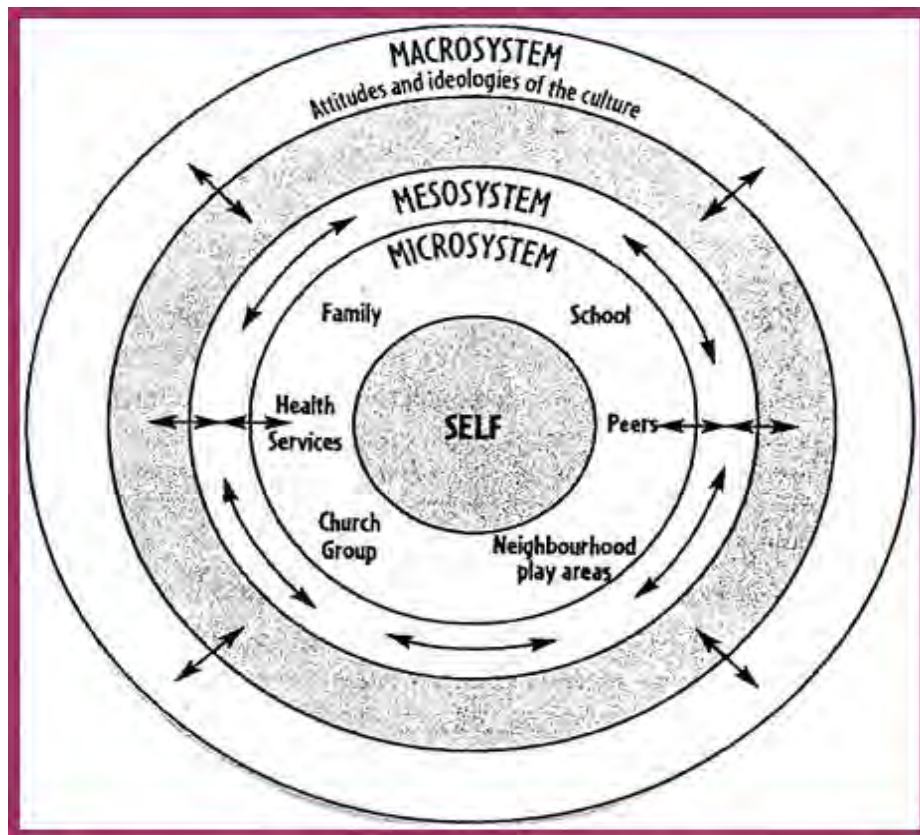


Figure 3.1: Bronfenbrenner's Ecological Model (Adapted from Donald et al, 2002, p. 60)

What are the implications of the diagram? According to Addison (1992), Bronfenbrenner sees “the instability and unpredictability of family life as the most destructive force in a child’s development. This deprives children of the constant mutual interaction with important adults that is necessary for development”. Thus, psychopathology is defined in terms of disharmonious and fractured relationships. Guidance and counselling are one such relationship, an interaction between an adult and a learner. “According to the ecological theory, if the relationships in the immediate micro-system break down, the child will not have the tools to explore other parts of the environment. These deficiencies show themselves especially in adolescence as anti-social behaviour, lack of discipline, and inability to provide self-direction” (Addison, 1992). According to Paquette and Ryan (2001), “knowing about the deficiencies or breakdown occurring within children’s homes, it is possible for our educational system to make up for these deficiencies, and is therefore necessary for schools and teachers to provide stable, long-term relationships”. This includes a relationship with the school counsellor. Counselling in this approach holds that an individual is best understood by assessing his/her interactions with family and community members and, an individual’s symptoms are best understood within the context of a dysfunctional system (Juma, 2011).

This theory is pertinent to understanding the reality of challenges that the youth have to face, which in turn affect their psychological well-being. It has implications for the practice of School Psychological Services (SPS), which have to counteract the negative effects of environmental contaminants. But Bronfenbrenner’s assertion that,

“the primary care-giver is the one who can provide children with stable, long-term relationships that is meant to last a lifetime, and although schools and teachers fulfil an

important secondary role, they cannot provide the complexity of interaction that can be provided by primary adults, is unfortunate and demoralising” (Paquette & Ryan, 2001, p.3).

It is important that schools, teachers and counsellors work together to support the primary relationship and to create an environment that welcomes and nurtures families. The violence, drugs, crime, the ever-increasing HIV infection rate and high rates of teenage pregnancy in neighbourhoods and townships are but some of those challenges learners face on a regular basis and the network of relationships they form with psychologists, social workers and school counsellors can help restore the balance. This is what De Jong (1996) means when she says that the ecosystemic position should include a salutogenic (health and solution-focused) in addition to a pathogenic (illness and problem-focused) philosophic base. A learner-counsellor relationship should be proactive and not reactive, not based on deficiencies but strengths.

The ecosystemic theory draws on the Systems Theory. Schools and families are seen as wholes whose functioning is dependent on the interaction between parts (Donald *et al.*, 2002, p. 47). Donald *et al.*, (1997), mooted that in order to understand the whole, we need to examine the relationship between all parts of the system. It recognises the social and physical environment within which the individual is embedded. The school is an example of a system with different parts, consisting of its staff, its students, its curriculum, and its administration. To understand the school as a whole, one needs to examine the relationship between its different parts. Each system (*viz.* school) has its own characteristic patterns, which make it unique. The pattern is made up of repeating parts which together form a total impression, or a characteristic way in which things

tend to happen. Communities are unique with unique needs and concerns, and it is incumbent upon School Psychological Services to address the needs of the communities they service.

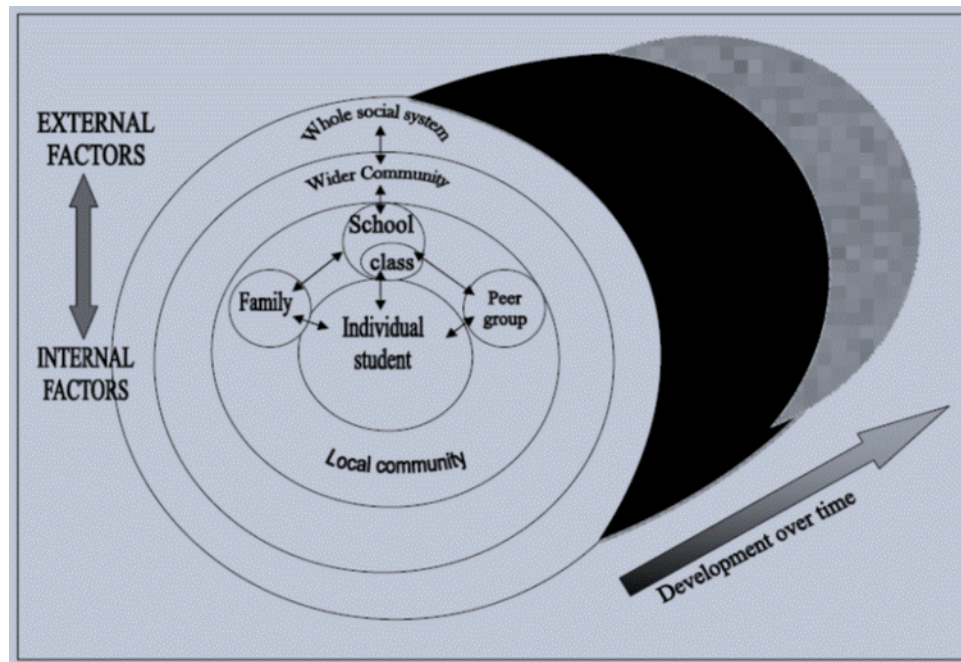


Figure 3.2: Levels of Systems related to the Education Process
(Adapted from Donald et al., 2002, p.55)

Figure 3.2 shows the different parts that constitute the whole (gestalt), and how they interact with each to enhance the holistic development of an individual. According to Donald *et al.*, (2002), a fundamental thinking, in terms of systems, is that cause and effect relationships are not seen as taking place in one direction only but as occurring in circles or cycles. Because of the interrelationship between the parts, an action in one part of a system cannot be seen as the cause of an action in another part in a simple, one-directional way. In systemic thinking, actions are seen as triggering and affecting one another in a reciprocal way. Actions (for example, change) in a school can, for example, influence action in the family, the community, and vice versa. The essence of the systems theory is that social problems like substance abuse, HIV and AIDS or violence (for example, domestic violence, bullying) cannot be blamed on the individual, but that

the cause of problem could be located in the family, church, mosque, family, community or even in the larger society. It is for this reason that parental involvement is seen as an important aspect of psychological services, as partners working alongside school counsellors and psychologists for learners' benefit. As Stone *et al.*, (2008) put it, the ecosystemic theory focuses on the relationship between human behaviour and the social environment, specifically, how individuals deal with social problems such as poverty, disability, crime and delinquency and, disparities and disproportionalities.

The primary intent for the provision of School Psychological Services is to promote mental and physical wellness and facilitate learning of learners. They are meant to increase students' capacity to overcome academic, personal, and social problems that could hinder their attainment of educational success and a satisfying and productive life (DoDea Manual 2946.4, 2001). They provide a range of services to assist children and adolescents in their learning, growth and development by providing supportive services to help students meet academic and emotional challenges. School Psychological Services consist of direct and indirect interventions that require involvement with the entire educational system, including the learners, teachers, counsellors, administrators, other school personnel, community agencies, and a variety of others that may be important on an individual basis. School Psychological Services are expected to help children and youth succeed academically, socially and emotionally.

3.4 Conclusion

In this chapter I have presented the conceptual frameworks dealing with concept of School Psychological Services and health promoting schools, and also provided a synopsis of the different theoretical viewpoints relevant to the study. The theories discussed fall into two categories, namely, the theory dealing with the nature of knowledge construction and the relevance of School Psychological Services in helping learners navigate through life's challenges and an the ecosystemic perspective on adolescent development which emphasise the importance of adult intervention and support in helping young people deal with issues affecting their wellbeing and mental health.

Chapter four focuses on research methodologies employed in the study, namely, description of sites; research design; instruments; validity and reliability; data processing and analysis; and ethical issues.

CHAPTER FOUR

RESEARCH DESIGN AND METHODOLOGY

“Adults who give freedom without guidance are sending youth on a journey without a map” [Brendtro, Brokenleg, & Van Bockern, S.,1990, p. 81]

4.1 Introduction

Chapter Three dealt with the conceptual and theoretical frameworks underlying this study. Chapter Five describes and provides detailed explanations of the research methodology adopted for this study. First, it provides a description of the purpose of the research. Secondly, it describes the research design, broadly positioning it in the qualitative research paradigm and specifically locating it in the multi-sites case study design. Thirdly, it describes the research sites, procedures used to obtain the sample and the quantitative and qualitative methods of data collection employed, viz. questionnaires and interviews, and a description of the data analysis procedures adopted.

4.2 Purpose of Study

The purpose of the study is to investigate participants’ experiences of Psychological Services in high schools. The research attempts to respond to the following research questions:-

- What are participants’ (viz., learners, school counsellors, educators and principals) experiences of School Psychological Services provisioning in selected secondary schools in Kwazulu-Natal?

The sub-questions which underpin the above research question are:

- a) What are participants' (viz., learners, school counsellors, educators and principals) understandings of Psychological Services and their impact on learners' well-being and academic performance?
- b) What are learners' needs for School Psychological Services as identified by participants (viz., learners, school counsellors, educators and principals)?
- c) What is the current status of Psychological Services (including the various forms of School Psychological Services and resources) in the selected secondary schools?
- d) What are the challenges or obstacles to the effective implementation of Psychological Services in the selected schools?

4.3 Research design and methodology

This study falls into the category of exploratory sequential mixed methods research, which according to Creswell (2014, p. 218) draws on both qualitative and quantitative research, and in the process minimises the limitations of both approaches. Mixed methods provide a sophisticated, complex approach to research and are a useful strategy to have a more complete understanding of the research problem. Maree (2007, p. 51) describes as research which is concerned with understanding the processes and the social and cultural contexts which underlie various behavioural patterns and is mostly concerned with exploring 'why' questions of research. An investigation of participants' (i.e. learners, school counsellors, educators and principals) experiences of School Psychological Services is essentially qualitative in nature. Maree (2007) states that qualitative research, typically, studies people or systems by interacting with and observing the participants in their natural environment (*in situ*) and focuses on their meanings and interpretations. Qualitative research involves an interpretive, naturalistic approach to its

subject matter as it involves studying phenomena in their natural setting and consequently enables researchers to make sense or interpret phenomena in terms of meanings people attach to them (Maree, 2007; De Vos, 2002; McMillan, 2000; Kumar, 1999). I have used both the interpretive and constructivist ideologies in an attempt to investigate and understand how learners construct meanings from their experiences of School Psychological Services, their individual and shared meanings of School Psychological Services, and how they actively construct new knowledge as they interact with their environment (MoodleDocs, 2008; Dixon-Krause, 1996; Roeser et al., 1998).

According to Slezak (2007) the main underlying assumption of constructivism is that individuals are actively involved right from birth in constructing personal meaning that is their own personal understanding from their experiences. As Stobie, Gemmell, Moran and Randall (2002) put it, there is an advantage of taking a ‘first’ and ‘fresh’ interpretative (hermeneutic) and analytical look at the practice, culture and developmental progression of services without the biases of long-established involvement. Hermeneutic qualitative research is based upon people’s constructions of the world, that is, the serious intention to understand the phenomenon under study and its complexities. In this study, such a spotlight is placed on School Psychological Services and participants’ experiences of the variety of services it delivers and how they impact on their psychological well-being and academic performance.

Qualitative research also provides a description of social phenomena using terminology that “preserve the organisation, interpretations, and meaning of phenomena as constructed by the individuals involved” (Peck & Furman, 1992, p. 2), and uses “multiple perspectives to help

readers get the feel for the subjective world of the respondents” (De Vos *et al.*, 2002, p. 357). The social phenomenon in this case is School Psychological Services and its impact on learners’ wellbeing. According to Kumar (1999), the purpose of a qualitative study is primarily to describe a situation, phenomenon, problem or event as it exists and carry out an analysis to establish the variation in the situation, phenomenon or problem without quantifying it. Denzin and Lincoln (2000), maintains that qualitative research is concerned with the understanding of real life events or situations which enables the researcher to discover what people do, what is important and meaningful to them, how they adapt to change, and how they make sense of the world.

Though this study is grounded mainly in mixed methods research, it is an exploratory study focused on gaining insight into the availability of School Psychological Services and other types of services provided. According to Babbie and Mouton (2011) exploratory research provides a basic familiarity with the subject and is typical when a researcher examines a new interest, is breaking new ground or when the subject is relatively new. Exploratory research studies may be seen as the first stage in a sequence of studies as they focus on the “what” questions, with very little “how” and “why” questions (De Vos *et al.*, 2002). Exploratory studies are appropriate for persistent phenomenon (Babbie & Mouton, 2011), as it is the case with School Psychological Services. “Because exploratory studies usually lead to insight and comprehension rather than the collection of detailed, accurate, and replicable data, these studies frequently involve the use of in-depth interviews, and the use of informants” (*ibid*, p. 80). Although exploratory studies are essential for breaking new ground, and can yield new insight into the topic, they seldom provide satisfactory answers to the research questions due to lack of sample representativeness.

Describing Psychological Services in different school contexts, their variations, the services they provide and how they benefit learners is a qualitative approach. However, “once we quantify data obtained on a phenomenon, situation, problem or issue and the analysis of information gathered is geared to estimating the impact, effects or magnitude of the variation, the study is classified as a quantitative study” (Kumar 1999, p. 10). The quantitative aspect of the study entails the use of questionnaires and frequency counts to determine and confirm the extent of the utilization of services, that is, having some idea of the number of people who use the services and how participants feel about the services provided, analyse the experiences and perceptions of participants on the impact of Psychological Services on learners’ behaviour patterns and academic performance. This forms the gist of a qualitative inquiry and consequently, the perceived reality of the participants in the research situation forms the core of the study. Hence, the study focuses on participants’ perceptions of school Psychological Services. A word of caution by Kumar (1999) is that qualitative and quantitative approaches have their strengths and weaknesses, advantages and disadvantages and that ‘neither one is markedly superior to the other in all respects’ (Kumar, 1999, p. 12).

4.4 Multi-site exploratory study

The study is a multi-site exploratory study which is “conducted to gain insight into a situation, phenomenon, community or individual” (De Vos et al., 2002, p. 109). According to Crowe *et al.*, (2011), “the primary purpose of the case study is to determine the factors and the relationship among the factors that have resulted in the current behaviour or status of the subject of the study”. In other words, the case study lends itself well to capturing information on more

explanatory ‘*how*’, ‘*what*’ and ‘*why*’ questions, not just what. The study involves studying multiple school contexts simultaneously or sequentially in an attempt to generate a still broader appreciation of a particular issue. The many sites and participants can be used to develop theory. Pereira and Vallance (2006) recommends using multiple site (multi-site or collective) studies because findings emerging from the study of several heterogeneous sites would be more robust, and as such conclusions reached from the findings derived from the sites would be more persuasive than if the study involved one school. Hence, I chose seventeen schools for the study to investigate participants’ personal experiences of School Psychological Services. They were chosen purposively and were accessible to me as I knew either the principal of the school or someone in management due to teaching practice.

According to Crowe *et al.*, (2011) “multi-site studies may be approached in different ways depending on the epistemological standpoint of the researcher, that is, whether they take a critical (questioning one’s own and others’ assumptions), interpretivist (trying to understand individual and shared social meanings) or positivist approach (focusing on generalizability considerations)”. My standpoint is interpretivist, as I will be reporting on and critiquing experiences and perceptions of SPS. It is important in a multi-site study that data collection be flexible to allow a detailed description of each individual case to be developed before considering the emerging similarities and differences in cross-case comparisons. Although I used many sites (i.e. schools) and participants (i.e. learners) with a view to develop a theory or test one, I was cognisant of the fact that even if schools had a lot in common, they were unique and their contexts differ. Data from the schools was broadly comparable even though they vary in nature and depth.

4.5 Research sites

There are 186 Secondary Schools in the Ethekewini Service Centre, which includes the Umlazi and Pinetown Districts. I selected 19 secondary schools using a convenient sampling method based on their familiarity and proximity to the university. I chose them because I had visited them before during teaching practice, wherein university staff visits schools to supervise student-teachers. The schools chosen were: six in Claremont, two in Reservoir Hills, two in Pinetown, two in Westville, six in Umlazi and one in Chesterville. Claremont, Chesterville and Umlazi are residential areas (so-called Townships, in the South African lingo) in the outskirts of Durban which is predominantly African. Westville and Pinetown are White residential areas, also in the outskirts of Durban. The only Indian dominated residential area I chose for the study was Reservoir Hills. All these residential areas constitute one Ethekewini Municipality/Metropolitan.

Although the selected schools belong to the same province and share commonalities, they reflect different educational contexts in terms of their location, demography, physical and financial resources, learner enrolments, and educator-learner ratios.³

Tables 4.1(a) and 4.1(b) provides a brief profile of each of the 17 schools, including their mission statements to give readers a mental picture of each school. They are as follows:

³N.B. For ethical reasons schools' names have been omitted, and the word 'African' is used in this study to refer to black South Africans without any intention to offend anyone. Information about schools and their mission statements was obtained either from the school principals or the school websites.

Table 4.1 (a): RESEARCH SITES (SCHOOLS)

SCHOOL	A	B	C	D	E	F	G	H	I
PUBLIC/PRIVATE	Public	Public	Public (Ex-model C)	Public (Ex-model C)	Public (Ex-model C)	Public	Public	Public	Public
LOCATION	Township	Township	Suburban	Suburban	Suburban	Suburban	Township	Township	Township
MISSION	To develop a caring, responsible and educated adult who would contribute positively to the socio-economic development of the community	To strive for excellence in all that we do academically, socially, culturally and in sports	We are committed to the pursuit of academic excellence (Shaping women to shape the future)	To be a centre of educational excellence in developing the whole person intellectually, emotionally, spiritually and socially	We strive to maximize every learner's potential in order that she may serve society and experience personal fulfillment through the development of her unique talents and abilities	To provide lifelong knowledge through the delivery of quality teaching and strive for educational excellence in a safe, healthy and affirming democratic learning environment	To produce highly committed and fully dedicated people with skills, knowledge and values to make a significant contribution to the socio-economic development of our country	To lead in the uplifting of the socio-economic status of the community by providing holistic education to learners	To produce a fully developed future citizen through the provision of quality education
STAFF	35	47	54	39	34	23	93	49	23
ENROLMENT	1250	1463	1200	1200	1100	650	2580	1312	860
RATIO	1:36	1:25		1:30	1:32	1:28	1:27	1:28	1:37
DEMOGRAPHY	African	African	Mixed	Mixed	Mixed	Mixed (but predominantly Indian)	African	African	African
MIXED/UNISEX	Co-educational	Co-Ed	Unisex(Girls)	Unisex (Boys)	Unisex (Girls)	Co-Ed	Co-Ed	Co-Ed	Co-Ed
MAIN LANGUAGE	Zulu	Zulu	English	English	English	English	Zulu	Zulu	Zulu
NUMBER OF PARTICIPANTS	30	60	29	51	37	53	60	56	24

Table 4.1 (b): RESEARCH SITES (SCHOOLS)

SCHOOL	J	K	L	M	N	O	P	Q
PUBLIC/PRIVATE	Public	Public	Public	Public	Public	Public	Public	Public (Ex-model C)
LOCATION	Township	Township	Township	Township	Township	Township	Township	Suburban
MOTTO	To produce a competitive, holistically developed learner who will contribute to the betterment of the community	To provide quality teaching and learning that will enable learners to participate in a non-racial society and global economy	To provide quality education which will benefit all learners and the community	To prepare learners to meet the economic, technological and social challenges of the country	To provide excellent education which will develop each learner to the fullest so as to make them marketable after matric	We commit ourselves to being a self-reliant learning institution and will ensure that our school provides a relevant and quality learning experience to all learners	To develop students who would be able to cope with life's challenges and be able to make correct choices in life	Nurturing fine young gentlemen - to develop boys' confidence to embrace the challenges of the future
STAFF	35	32	35	42	38	38	35	47
LEARNERS	1065	1050	1200	1271	980	1200	960	800
RATIO	1:30	1:33	1:34	1:30	1:26	1:25	1:27	1:28
DEMOGRAPHY	African	African	African	African	African	African	African	Mixed
MIXED/UNISEX	Co-educational	Co-Ed	Co-Ed	Co-Ed	Co-Ed	Co-Ed	Co-Ed	Unisex (Boys)
MAIN LANGUAGE	Zulu	Zulu	Zulu	Zulu	Zulu	English	Zulu	English
NUMBER OF PARTICIPANTS	40	50	46	67	52	51	50	17

4.6 Population

Based on De Vos *et al.*, (2002, p. 199)'s definition of a population “as the totality of persons, events, organisation units, case records or other sampling units with which the research problem is concerned”, the study involved samples drawn from three different populations, namely, school counsellors/teachers, learners and principals. I deemed them as important participants since their lives are impacted upon by School Psychological Services. The school counsellors are mainly educators, who apart from having a teaching load are expected to assist learners with problems. Some school counsellors, especially in ex-model C schools, served as school fulltime counsellors without a teaching load. Learners were mainly adolescent high school learners representing various socio-economic groups, races, ages, sex, languages, cultural groups, locality (urban/rural) and grades. The accessible population were all learners in the 186 high schools in Umlazi and Pinetown Districts with about 186000 learners. A total of 19 high schools – about 10% of the high schools – were meant to participate in this study, comprising White, Indian and African schools. The DoE letter of approval included a list of 19 high schools⁴. However, the number was reduced to 17 due to logistical problems. I interviewed the school principals, educators-cum-school counsellors, and administered a questionnaire to learners. It is important to indicate that schools in the townships such as Claremont and Umlazi are 100% Black, while those in neighbourhoods such as Westville and Reservoir Hills are mixed. This was as a result of the Group Areas Act of 1966 which prohibited non-Whites from living in the most developed areas which were reserved for Whites (Wikipedia, 2013). These schools were selected because

⁴Note: Due to logistical problems, I could not collect data from two high schools. This means that 17 high schools out of the intended 19 participated in the study.

they were within a 40km radius from each other and because of their proximity to the university, my place of employment, and thus convenient to reach.

4.6.1 Sampling procedures

According to Cohen, Manion and Morrison (2011), four factors need to be taken into consideration when deciding on a study sample, namely, the size of the sample, the sampling strategy, the representativeness and parameters of the sample, and accessibility to the sample. I had to consider this when deciding on the study sample. Plus, multiple informants were used in this study, which Renk (2005b) calls the ‘gold standard’ when examining the behaviour of children and adolescents. As such, different sampling procedures were used to select the different samples used in this study, such as learners, school counsellors and principals. The sampling technique used to select learners to complete the questionnaire was cluster sampling, a form of sampling in which groups and not individuals were randomly selected. Two classes per school were selected, with a total of approximately 50 learners. Also I did not want to cause disruption in schools hence the choice of clusters and only 50 learners. The sex of the learners was not considered to be an important factor in this research study, hence, balancing the male and female composition of groups was not necessary. The race (i.e. ethnic group) of learners, however, was considered important as the purpose of the study was, among other things, to show the effects the disproportionate provision of Psychological Services in South African schools. It is well documented that during apartheid white schools were better resourced than black schools. As Mothata (2000, p. 2) succinctly states, “for years there were separate education departments for different races, with Africans being at the bottom of the ladder in terms of provision of

resources, and as a result, per capita expenditure was highly unequal” At some stage in the early 70’s the figure stood at ten rands and one rand respectively. In order to minimize bias, the random selection of sample was done as follows:

- 19 high schools were randomly chosen, but only 17 participated;
- 17 school counsellors and Life Orientation educators had to complete a questionnaire;
- 10 school principals were also interviewed, as a follow-up sample
- 50 learners selected in random clusters or classes (that is, two classes per school were used and I took the class that was available during my visit) ; and
- Total of 773 high school learners participated in the study.

De Vos *et al.*, (2002) state that the major reason for sampling is feasibility. This is feasibility in terms of managing the size of the group. It is for this reason that the study involved 17 high schools within a 40km radius of the university. Five different and apparently unique localities were chosen, namely, Westville, Pinetown, Claremont, Chesterville and Umlazi to select schools from. The rationale behind the choice was my need to investigate the delivery of Psychological Services in public schools with ‘uniquely’ different histories. With educators and school principals the sampling procedure used was purposive sampling. Educators were chosen because I felt that they would be better informed about Psychological Services than other educators.

4.6.2 Pilot Study

The project was preceded by “a small scale trial-run of all the aspects planned for use in the main inquiry” (De Vos *et al.*, 2002), which forms an integral part of the research process. It is the

pretesting of an instrument by trying it out on a small number of persons having characteristics similar to those of the target group of participants. It helps the researcher to fine-tune the study for the main inquiry and uses similar subjects as a final survey. It is for this reason that the research instruments used, namely, the survey questionnaire and semi-structured interviews were pilot tested before use. The reason for pilot-testing the instrument was to improve the quality of the data gathering instruments and ensure the clarity of questionnaire content.

The pilot study has a smaller number of participants as it is meant to test the validity and reliability of the instruments and scoring procedures. The pilot study involved school counsellors, Life Orientation teachers and high school learners. It helped me refine the questionnaire items for each group and frame questions for School Counsellors, who had to complete their questionnaire first. Questionnaire items in the pilot study were modified or adapted to suit the data sought. The pilot study enabled me to improve the question order, filter the questions and layout. Data collected from the pilot study sample – apart from fine-tuning the research instruments – also informed me of their experiences and perception of the availability of Psychological Services in schools, the types of services available and their perceived challenges confronting learners. The questionnaire was administered to thirty participants (*Appendix C*).

Table 4.2 indicates the distribution of the pilot study sample:

Table 4.2: Distribution of participants in the pilot study sample (N=30)

DEMOGRAPHIC VARIABLES	LEVELS	PERCENTAGES
Age	Seventeen (17)	13.3% (9)
	Eighteen (18)	46.7% (15)
	Nineteen (19)	23.3% (1)
	N/A (Age not disclosed)	16.7% (5)
Gender	Male	40%% (12)
	Female	60% (18)
Race	African	63.3% (19)
	Indian	16.7% (5)
	White	20.0% (6)
Participants per School	School B Learners	16.7% (5)
	School C Learners	16.7% (5)
	School D Learners	16.7% (5)
	School G Learners	16.7% (5)
	School M Learners	16.7% (5)
	School Counsellors	16.7% (5)

It should be pointed out that participants of the pilot study include twenty-five high school learners and five educators. The following is a break-down of the 30 pilot study participants:

- Five (5) Life Orientation educators whose teaching experience ranged from 10 to 39 years, and one school counsellor. Four of the educators (approx. 80%) had degrees. The school counsellor had relevant training. Their ages were not recorded but their professional experience, and
- Twenty-five (25) grade 12 learners, five randomly chosen from each of the selected schools.

Participants were selected for the pilot to conduct a baseline assessment of their understanding of School Psychological Services (i.e. establishing their prior knowledge and experience); refine the

questionnaire; and identify the resources and challenges impacting the delivery of School Psychological Services.

According to Cohen *et al.*, (2011), the wording of a questionnaire is of paramount importance and pre-testing it is crucial to its success. In order to increase the reliability, validity and practicability of the questionnaire, pilot testing helped me check the clarity of the questionnaire items, instructions and layout; eliminate ambiguities or difficulties in wording; gain feedback on the type of questions and its format (e.g. rating scale); check the time taken to complete the questionnaire; check whether the questionnaire is too long or too short, easy or difficult, too engaging, too threatening, too intrusive, or too offensive; generate categories from open-ended responses to use as categories for closed response-modes; identify commonly misunderstood or non-completed items, and try out the coding/classification system for data analysis.

Educators who participated in the trial run (pilot) of the research instrument, by completing the questionnaire and thereby enabling me to improve the questionnaires (Appendices D, E, and F), also participated in the actual study because they were deemed as knowledgeable about the subject as designated school counsellors.

4.6.3 Main study samples

Apart from the pilot study discussed above, three samples were used for the actual study, namely, school counsellors/teachers, learners and principals.

4.6.3.1 School counsellors/Teachers

According to Watkins *et al.*, (2001), “teachers are the best source of information about psychological services”. For this reason, a questionnaire was administered to 17 School Counsellors or Guidance teachers in schools within the Umlazi and Pinetown Districts. These were individuals of both sexes with varying levels of professional training and teaching experience, some of whom have been in practice for more than twenty years. Most of them served a dual role of teacher-counsellor, employed either by the Department of Education or by the School Governing Body (SGB). Some of them were professionally qualified to practice as School Counsellors, whereas some were Life Orientation educators without relevant training but who attended training workshops organised by the Department of Education. However, one of the main challenges I experienced with this group was that whilst some of the school counsellors were professionally qualified, some were designated counsellors by virtue of being Life Orientation specialists, whose job description entailed counselling learners. Notwithstanding, their input provided some important dimension as to their experiences of School Psychological Services.

Five school counsellors from the selected schools were the first to be interviewed because they were part of the pilot study, and were also involved in the actual study. I considered them an important resource as they were the ones providing the Guidance and Counselling services. For example, one cannot talk about School Psychological Services without including School counsellors. Their experiences and understandings of School Psychological Services had to be unpacked from a social constructivist point of view, its relevance to individuals in the process of

constructing meaning and knowledge and challenges impacting on the delivery of good quality Psychological Services. This sample raised important issues pertinent to School Psychological Services. I contacted the school counsellors telephonically to schedule a meeting, briefed them about the research study and asked them to decide on the opportune time for the interview. In schools without counsellors, I interviewed guidance teachers or Life Orientation (LO) teachers who acted as designated school counsellors. Arrangements to administer questionnaires to learners were made with School counsellors.

For the school counsellors' sample, I have presented a summary of the relevant characteristics such as their teaching experiences, gender, qualifications and race in the table below:

Table 4.3: Distribution of participants in the School Counsellors' sample (N=17)

DEMOGRAPHIC VARIABLES	LEVELS	PERCENTAGES
Gender	Male	23.5% (4)
	Female	76.5% (13)
Position	Department of Education (DoE)	94.1% (16)
	School Governing Body (SGB)	5.9% (1)
Qualifications	Teachers' Diploma	5.9% (1)
	Bachelor of Education (B.Ed.)	52.9% (9)
	Bachelor of Education Honours (B.Ed. hons)	41.2% (7)
Race	African	64.7% (11)
	Indian	11.8% (2)
	White	23.5% (4)
Teaching experience	Less than 10 years	17.6% (3)
	10 – 19 years	47.1% (8)
	20 – 39 years	35.3% (6)
Portfolio	Qualified School Counsellor	23.5% (4)
	Life Orientation HoD	76.5% (13)

It should be pointed out that in schools without counsellors, the head teacher or Head of Department (HoD) responsible for Life Orientation (LO) was interviewed and also completed the questionnaire. Only one educator/counsellor could not be interviewed due to logistical constraints.

According to the above table, 47.1% of the School Counsellors had teaching experience ranging from 10 to 19 years, 35.3% had between 20 and 39 years' experience and 17.6% counsellors have been teaching for less than 10 years; 76.5% of the participants were female and 23.5% of the participants were male, and 52.9% of the School Counsellors had a professional teaching degree, 41.2% had an honours degree and 5.9% had a teachers' diploma. Only four educators (23.5%) were qualified school counsellors.

According to table 4.3, 64.7% of the participants in the School Counsellors' sample were African, 11.8% Indian and 23.5% were White. This differs slightly from the South African demographical situation, which – according to Statistics South Africa (2009) – is 79.2% Black, 8.9 % White, 8.9% Coloured, and 2.5% Indian of a population estimated at 51.77 million (Statistics South Africa, 2012).

4.6.3.2 High school learners

It is important to listen to high school students' voices in order to make school environments responsive to their needs. Hence, a questionnaire (*Appendix D*) was administered to 773 learners spread across seventeen high schools (*Appendix I*) in Umlazi and Pinetown Districts which

participated in this study. Fifty learners per school – from both Grade 11 and 12 classes – completed the questionnaires. Learners were selected in classes as clusters. Taking a few learners, for example, 25 learners from a class of 30 was not feasible. In such cases I was compelled by logistics to use the whole class. Taking classrooms as clusters, some bigger than others, one or two classrooms per school were used. Only learners from Grades 11 and 12 completed questionnaires investigating the availability of School Psychological Services, the types of services available and how they made use and benefited from the services academically and behaviourally. The decision not to involve learners from all high school grades was based on the assumption that senior learners would have a better understanding of Psychological Services as they have been in the school longer than others, unlike learners from grades 8 to 10 most of whom are still adjusting to their new surroundings. For this sample I present characteristics relevant to the study, which are learners’ age, sex, grade, and ethnic group.

Table 4.4: Distribution of participants in the learners’ sample (N=773)

DEMOGRAPHIC VARIABLES	LEVELS	PERCENTAGES
Age	Fifteen	04% (3)
	Sixteen	13.1% (101)
	Seventeen	31.0% (240)
	Eighteen	32.9% (254)
	Nineteen +	22.6% (175)
Gender	Male	50.5% (390)
	Female	49.5% (383)
Grade	Eleven	32.5% (251)
	Twelve	67.5% (522)
Race	African	81.8% (632)
	Indian	8.7% (67)
	White	8.4% (65)
	Coloureds	1.2% (9)

Table 4.4 provides a ‘bird’s eye view’ of the learners’ sample from the seventeen participating schools in the larger Umlazi and Pinetown Districts. As indicated in the table, almost 60% of the learners were between 17 to 18 years old. This sample was demographically representative of different race groups. African learners constitute the majority of participants, followed by Indians and Whites. Male participants marginally exceeded females. Lastly there were more Grade 12 learners than Grade 11.

4.6.3.3 School Principals

Since I completed data collection in 2008, I had to make a follow-up to investigate if there are any major changes in the provision of School Psychological Services. With the introduction of a new policy document, namely, Curriculum and Assessment Policy Statement (CAPS), I felt it opportune and proper to probe if we can anticipate any significant or noteworthy changes in the provision of School Psychological Services (SPS). This information will either supplement or complement data generated from learners and school counsellors. For that purpose, I had to interview ten school principals (*c.f. Appendix F*), either to refute or corroborate sentiments expressed by school counsellors and learners. I also wanted to investigate the expectations of school principals about SPS. The open-ended questions were used to provide triggers for discussion rather than to be a prescriptive structure. Results of the follow-up will be discussed later. Table 4.5 below presents the composition of the follow-up sample.

Table 4.5: Distribution of participants in the School Principals' sample (N=10)

DEMOGRAPHIC VARIABLES	LEVELS	PERCENTAGES
Gender	Male	70% (7)
	Female	30% (3)
Qualifications	Teachers' Diploma	10% (1)
	Bachelors' Degree	20% (2)
	Honours' Degree	40% (4)
	Masters' Degree	30% (3)
Race	African	50% (5)
	Indian	30% (3)
	White	20% (2)
Teaching experience	Less than 10 years	00% (0)
	10 – 19 years	10% (1)
	20 – 39+ years	90% (9)
Principalship experience	Less than 10 years	70% (7)
	10 – 19 years	20% (2)
	20 – 39+ years	10% (1)

As depicted in Table 4.5 above, 70% of the sample was male, 40% had a masters' degree, and 50% were of African descent. The majority of sample (90%) had taught for more than 20 years, and 70% of principals had less than 10 years' experience at the helm. The longest serving principal had spent 41 years in the teaching profession whereas the longest tenure as principal was 26 years. Although the likelihood of the findings of this sample differing significantly from that of the other samples is slim, they will be discussed in item 5.3 (p. 156).

4.7 Research instruments

Since this was a mixed methods study, both qualitative and quantitative research approaches were used. In this case, both questionnaires (quantitative) and interviews (qualitative) were

administered to generate data. As indicated earlier, qualitative research is steeped into the multi-method approach to data collection, due to the complementary nature of the data generated through diverse methods (De Vos, Strydom, Fouchè & Delport, 2002; Maree, 2007). This is often referred to as triangulation, which originates from the notion of using three points to locate the focal point at their intersection. It is strategy for improving the validity and reliability of research or evaluation of findings (Maree' 2007, p. 80). Triangulation is defined as “using different types of sources that can provide insights about the same events or relationships” (De Vos *et al.*, 2002, p. 341), and “a process of viewing an issue from different angles”, was employed to gather solid and comprehensive data. Since no single approach is sufficient to understand a human phenomenon such as behaviour, it has to be looked at from different perspectives, and holistically. It is a validity procedure where researchers search for convergence among multiple and different sources of information to form themes or categories in a study (Creswell & Miller, 2000). According to Mathison (1988), triangulation is the use of multiple methods, data sources, and researchers to enhance the validity of research findings.

Maree (2007, p. 81) dismisses the idea of a fixed point in a qualitative study and proposes that one should not triangulate, but crystallize since “our world has more than three sides”. According to Maree (2007, p. 81), the concept of crystallization will enable us to shift from seeing something as fixed, rigid, or two-dimensional, to seeing it as a crystal with an infinite variety of shapes, transmutations (or facets), dimensions and angles of approach. This means that the emergent reality is not a result of some form of measuring but emerges from the various data gathering techniques and data analyses employed and represents our own reinterpreted understanding of the phenomenon. Descriptions of findings are those which crystallize from the

data. This crystallized reality is credible in so far as those reading the data will be able to see the same emerging patterns, which adds to the trustworthiness of the research (Maree, 2007, p. 81). In spite of the sentiments expressed above, the triangulation used in this study is data triangulation which involves using different sources of information or data – such as school counsellors, learners and school principals – in order to augment the validity of a study. This use of multiple informants and more than one data-gathering method (questionnaires and interview schedule) can greatly strengthen the study's usefulness for other settings, even though it is mainly qualitative in nature. According to Guion, Diehl and McDonald (2012), “the benefits of triangulation include increasing confidence in research data, creating innovative ways of understanding a phenomenon, revealing unique findings, challenging or integrating theories, and providing a clearer understanding of the problem. However, one of its primary disadvantages is that it can be time-consuming. Collecting more data requires greater planning and organisation – resources that are not always available to researchers” (Guion *et al.*, 2012). School counsellors were interviewed first because I felt they would be more knowledgeable about School Psychological Services than learners, and thereafter I requested them to complete the questionnaire. Learners completed the questionnaire only.

4.7.1 Interviews

De Vos *et al.*, (2002, p. 291) assert that “the purpose of the research must guide the researcher to choose the most effective method of collecting information”. I had a difficult task of deciding on the appropriate and cost-effective method of data collection. Hence, I chose to use interviews and questionnaires. According to Kumar (1996, p. 109), interviewing is a commonly used method of

collecting information from people. He defines an interview as “any person-to-person interaction between two or more individuals with a specific purpose in mind” (*ibid*) and McMillan (2000, p. 164) defines it as “a form of data collection in which questions are asked orally and subjects’ responses are recorded”. De Vos *et al.*, (2002) refer to an interview as an interactional situation in which meaning is negotiated between numbers of selves. It is a short-term secondary social interaction between two strangers with the explicit purpose of obtaining specific information from the other (Neuman, 2000, 274). This means that the relationship between the researcher and the participant is fluid and changing, but is always co-constructed. In addition to administering the questionnaires, I interviewed educators/school counsellors and school principals to acquire specific information regarding their schools’ Psychological Services programmes. Kumar (1996) classifies interviews according to the degree of flexibility into structured and unstructured interviews. In this study, I used both and resorted to asking questions spontaneously during the administration of the interview schedule. I had main questions, and used probes and follow-ups to clarify the matter. At the same time I managed to get the participants to open up and express themselves clearly and maintain focus on issues at hand.

The interviews relate to gathering information on participants’ perceptions regarding School Psychological Services and how learners are perceived to benefit from the services. In both instances I used structured and open-ended questions. Structured questions give the subject choices from which an answer is selected, whereas with open-ended questions there are no predetermined, structured responses. Semi-structured questions are open-ended, yet specific in intent, allowing individual responses (McMillan, 2000). Interviews were my choice of data collection method with school principals due to the relatively small size of the sample. The

advantages of using the interview method, according to McMillan (2000) is that interviews usually achieve higher return rates, as often 90 to 95% of the subjects will agree to be interviewed. Also, the researcher can obtain more accurate responses as the interviewer can clarify questions and follow up leads (probing). The interview allows for a greater depth and richness of information. However, one disadvantage of interviews is that because they are expensive and time-consuming compared to other methods of data collection, the sample size is often small (McMillan, 2000). A description of each of the interview types follows:

4.7.1.1 Individual interviews

I used semi-structured interviews (*Appendix F*) to gain a detailed picture of school principals' beliefs and perceptions of School Psychological Services programmes. An interview schedule which is defined as a written list of questions, open or close- ended, prepared for use by an interviewer, in a person-to-person interaction (De Vos *et al.*, 2002; Kumar, 1996) was used. They were selected for their flexibility in terms of making clarifications and follow-ups (Kumar, 1996). The interview includes eleven open-ended questions and to obtain clarity on issues raised, I asked school principals pertinent questions regarding Psychological Services, which ranged from their understanding of School Psychological Services, learners' needs for School Psychological Services, the nature or model of the Psychological Services programme, the activities they performed (i.e. status of Psychological Services), to resources and challenges impacting on the delivery of Psychological Services. I also gained a detailed picture of their beliefs and perceptions *vis-à-vis* School Psychological Services, and was able to conduct a follow up. The interview with each school counsellor was held on site and in-camera with little

or no interference from learners and other teachers. The interview sessions lasted for a maximum of 60 minutes each. I managed to achieve a 100% return rate as meetings were scheduled well in advance and I conducted the interviews in person. I felt that school principals provided more insight into their perspectives regarding the provision of psychological services.

One of the weaknesses of the one-on-one interview is that as they involve interaction, cooperation is essential. Participants may be unwilling to share, and the researcher may ask questions that do not evoke the desired responses from participants. Secondly, responses can be misconstrued or even untruthful (De Vos *et al.*, 2002). My experiences were that with some school counsellors and principals I had to be very patient. One notable experience was when a school principal forgot to diarise an appointment and consequently double-booked herself. Others asked for postponements when I was already in their schools. Principals were, understandably, very occupied and appointments with them were made two weeks in advance. On the whole school counsellors, educators and principals were honest and spoke openly without necessarily being defensive or trying to create a good impression.

4.7.2 Questionnaires

The other instrument of data collection utilised in this study is the questionnaire, which is defined as “a set of questions on a form which is completed by the stakeholder in respect of a research project” (De Vos *et al.*, 2002, p. 172). In more detail, a questionnaire as a written document containing statements or questions that are used to obtain subjects’ perceptions, attitudes, beliefs, values, perspectives, and other traits (McMillan, 2000). According to Euvsard

(1996), the danger of designing questionnaires according to a researcher's own perceptions prevents participants' perspective from emerging. Survey questionnaires were used in the study together with semi-structured interviews to obtain data that would enable the researcher to answer the critical questions. I used both close-ended and open-ended questions to gather participants' understandings and experiences of School Psychological Services, the need for the services, the nature of services the programme provided and challenges which impacted on the delivery of services. Three different questionnaires were administered to 30 pilot study participants, 773 learners and 17 School counsellors. Questions generated from the research contained only one overriding thought, that is, participants' experiences of School Psychological Services. A preliminary study on Guidance and Counselling for the M.Ed. degree has helped me to generate and refine some questions. The sequence of questions started with non-threatening factual questions (e.g. *What is your definition of School Psychological Services? or What is your definition of adolescence?*) and ended with more opinion-related and personal questions (e.g. *Do you think learners need psychological services in their schools and why? What is the relationship between School Psychological Services and learners' academic performance?*).

By drawing on literature, and asking experts in research, including my previous supervisor and colleagues, to comment on the items, I managed to refine the instruments. These were individuals with psychology background and have supervised researchers in the discipline. I administered the questionnaire in person to learners and school counsellors because I felt that their input would be invaluable to the study. In addition, the questionnaire was pilot tested.

There are three questionnaires: one for the Pilot Study (*Appendix C*), one for learners (*Appendix D*) and one for School counsellors or guidance teachers (*Appendix E*). Also, being aware of the discrepancies in the provision of Psychological Services in ‘White’, ‘African/Black’ schools, I needed to find out if such discrepancies still existed in the post-1994 South Africa.

4.7.3 Procedure (Fieldwork)

The study was conducted in 17 high schools in four different areas, viz. Westville, Pinetown, Claremont and Reservoir Hills. A list of schools was obtained from the Department of Education and a sample of eighteen schools was selected. Principals of schools were contacted and appointments made to consult with either School counsellors or Life Orientation educators. In schools where there were no counsellors, there were always educators who ‘voluntarily’ took it upon themselves to assist learners with problems. These were mostly Life Orientation HoD’s. Written permission to visit schools was obtained from the provincial Department of Education (*Appendix A1*).

First, I made principals aware of permission from the Department of Education. Thereafter, I contacted school counsellors or Life Orientation teachers and scheduled meetings with them making sure that such meetings took place during their free time. For the pilot study, a sample of thirty participants completed the questionnaire (*Appendix C*). I also administered a questionnaire to about 50 learners per school, which resulted in a total of 773 learners from seventeen secondary schools (see *Appendix I*). With the help of Counsellors or LO educators, classes were arranged as clusters and a random selection of classes done. The selection of classes as clusters

was randomly done because I had no idea when I got to the school which classes I was going to get and consequently chose whichever classes were available.

4.8 Validity and reliability of the instruments

Since the study has both quantitative and qualitative research elements, it is important to establish the validity and reliability of a research instrument before conclusions based on collected data can be arrived at.

4.8.1. Validity:

The validity of an instrument, according to De Vos *et al.*, (2002), is defined as the degree to which an instrument does what it is intended to do, measures what it is supposed to measure, and yields scores whose differences reflect the true differences of the variable being measured rather than random or constant errors. It is the ‘extent to which a measuring instrument satisfies the purpose or which it was constructed’ (Van Rensburg, Landman & Bodestein, 1994, p. 560). The validities relevant in this study are content validity and face validity, which according to De Vos *et al.*, (2002) are used interchangeably. Brink (1999) refers to these as base validity (face and content) which refers to the intuitive judgement of experts that the instrument can be judged to measure what it is supposed to measure. Therefore, in the process of designing the questionnaires, drafts were given to experts (psychologists, school counsellors, teachers and university staff in the field of educational psychology) to solicit feedback on the appropriateness of the items in the instruments, their readability and clarity of contents, and the relevance of the items or statements. Based on their expert opinions, some items had to be modified and re-

worded before producing the final drafts that were used to collect data. The questionnaires administered were designed to gather learners', counsellors' and school principals' perceptions on their need for psychological services, the availability of Psychological Services and resources needed to offer psychological services in secondary schools. The following measures were taken to ensure that the instruments for learners and school counsellors meet the validity criterion:

- The language used was clear and unambiguous. For every item on the questionnaire, I ensured that the questions were simple and straightforward.
- Questions asked were at the level of learners' and students' comprehension, suitable for grades 11 and 12 learners.
- Offensive terminology was avoided. I made sure that words used were politically correct.
- The instruments were pilot-tested and administered in participants' natural setting (schools and classrooms).

The independent assessors felt that the wording of questions was unambiguous and it is very unlikely that participants would interpret the questions and statements differently. Their judgement was that the instruments would accurately measure what they are meant to measure. Based on the objective opinions of the panel, I was satisfied that the questionnaires measured what they were designed to measure. Also, researchers use member checks as the most crucial technique for establishing credibility. This consists of taking data and interpretations back to the participants in the study so that they can confirm the credibility of the information and narrative account (Creswell & Miller, 2000). A popular strategy for member checking is to convene a small group of participants to review the findings.

4.8.2. Reliability

Reliability is “the accuracy or precision of an instrument, the degree of consistency or agreement between two independently derived sets of scores; and as the extent to which independent administration of the same instrument yield the same (or similar) results under comparable conditions” (De Vos *et al.*, 2002, p. 168). The reliability of the instruments was established before they were used to collect data. The type of reliability referred to is internal consistency, the degree of homogeneity (i.e. similarity) among the items in an instrument. According to McMillan “internal consistency is used when the purpose of an instrument is to measure a single trait. A general rule of thumb is that there must be at least five questions about the same thing” (2000: 139-140). In the opinions of the panel of experts I approached and supported by the pilot study, the questionnaire items are linked and related to each other and – in one way or another – served the purpose of establishing participants’ experiences of School Psychological Services.

4.9 Trustworthiness of qualitative research

It is important that the researcher establish the trustworthiness of the qualitative and quantitative data generated in this study. De Vos *et al.*, (2005, p. 346) defines it as “establishing the truth value of the study, its applicability, consistency and neutrality”. Every systematic inquiry into human condition must address these issues. They further proposed four alternative constructs that more accurately reflect the assumptions of the qualitative paradigm. They are:

1. *Credibility:* This is an alternative to internal validity the goal of which is to demonstrate that the inquiry was conducted in such a manner as to ensure that the subjects were accurately identified and described. According to Shenton (2004, p. 64), “credibility deals with ‘how congruent are the findings with reality?’ and that ensuring credibility is one of the most important factors in establishing trustworthiness. The strength of the qualitative study that aims to explore a problem or describe a setting, a process, a social group or a pattern of interaction will be its validity”. It is important for researchers to promote confidence that they have accurately recorded the phenomenon under scrutiny. Hence, in this study, I used research techniques to gain alternative perceptions about Psychological Services using different participants in different contexts, namely, school counsellors, educators, high school learners and school principals. I needed to know their understanding of Psychological Services, what it entails and how it benefits learners? I also made sure that participants’ voices were not tampered with, their opinions were captured and correctly (or systematically) analysed and interpreted. I used data triangulation which entails using several data sources, namely counsellors, learners and students to verify their viewpoints and experiences of Psychological Services. This can generate a rich picture of the attitudes, needs or behaviours of participants as bits of information are used to corroborate the findings.

2. *Transferability:* This is an alternative to external validity or generalizability in which the researcher’s task is to demonstrate the applicability of one’s research findings to other contexts. It is concerned with the extent to which the findings of the study can be applied to other situations. This is contextual relevance, according to which the findings of the research study matches similar contexts outside the original study. Since the findings of a qualitative project are

specific to a small number of particular environments and individuals, it is impossible to demonstrate that the findings and conclusions are applicable to other situations and populations (Shenton, 2004). However a rich and detailed description of the context and research process will enable other researchers to see transferability of this study to other settings. The findings of the qualitative data can be ‘cautiously’ transferred to other South African schools since the delivery of Psychological Services is the responsibility of the National Department of Education, with Provincial departments tasked with carrying out the mandate. Contexts differ but problems around the delivery of Psychological Services are largely similar.

3. *Dependability:* It is an alternative to reliability, in which the researcher is tasked to account for changing conditions in the phenomenon chosen for the study as well as changes in the design created by increasingly refined understanding of the setting. Shenton (2004, p. 71) stresses “the close relationship between credibility and dependability and in practice, a demonstration of the former goes some distance in ensuring the latter. In order to address the dependability issue directly, the process followed within the study should be reported in detail, thereby enabling a future researcher to repeat the work, if not necessarily to gain the same results”. This means that the study should include detailed description of the research design and implementation, the operational detail of data gathering and a reflective appraisal of the project. I have attempted to address these issues in this chapter.

4. *Confirmability:* Confirmability is synonymous to objectivity which stresses the researcher’s need to ask whether the findings of the study could be confirmed by another. According to De Vos *et al.*, (2005, p. 351), “the trustworthiness of a research project can be established or

ascertained by asking the following questions: how credible are the particular findings of the study? How transferable or applicable are the findings to other settings? Are the findings replicable if the study was conducted with the same participants in the same context? How can one be sure that the findings are reflective of the subjects and the inquiry itself?” Techniques used to establish trustworthiness were the use of multiple data collection methods (triangulation), asking questions dealing with facts or behaviours, past or present and the use of external checks (Oppenheim, 1996). Shenton (2004) recognises the difficulty of ensuring real objectivity as tests and questionnaires are designed by humans and the intrusion of the researcher’s biases is inevitable. Hence, Shenton (2004, p. 72), recommends that, to address the issue of objectivity, steps must be taken to help ensure as far as possible that the work’s findings are the result of the experiences and ideas of the informants, rather than the characteristics and preferences of the researcher. I am confident that the findings of the study are a true reflection of the *status quo*, and that if things stay the same both in terms of the implementation of Psychological Services and the same participants are involved, the findings of this study can be confirmed. I also intend to facilitate a forum where I would present the results of this study to educators, to ensure the credibility of the findings and solicit feedback.

4.10 Data processing

For data processing, I needed to find a way to integrate information from multiple informants. First, I used the SPSS statistics computer programme to capture and analyse quantitative data. According to SPSS Inc. (2009), the software is used to turn raw data into information essential to decision-making. Questionnaires consisted of seven parts. Part one was designed to gather

demographic information and parts two to seven were then made up of questions on learners' needs for Psychological Services, the nature of services, their resource availability and accessibility of Psychological Services and their perceived impact on behaviour and academic performance. Close-ended (i.e. 'Yes'/ 'No') questions were followed up by open-ended questions where participants were requested to give reasons for their responses. Also, the interviews were recorded to guarantee data safety and were thereafter transcribed verbatim.

4.10.1 Data/Thematic Analysis

Data analysis entails the breaking down of data into constituent parts to obtain answers to research questions and to test hypothesis. De Vos *et al.*, (2002), stated that analysis means the categorising, ordering, manipulating and summarising of data to obtain answers to research questions. The purpose of the analysis is to reduce data to an intelligible and interpretable form so that the relations of research problems can be studied; tested and conclusions drawn. Data analysis is the process of bringing order, structure and meaning to the mass of collected data (De Vos *et al.*, 2002). It is an interesting, creative and yet time-consuming process which is nevertheless crucial to ensure that the voice of the other is heard. The first step in data analysis is managing data, organising data while making them easily retrievable and manipulable. To achieve this, I used themes, which as Ryan and Bernard (2003) put it, are “dynamic affirmations which control behaviour or stimulate activity’. They are features of participants’ accounts characterising particular perceptions and/or experiences that the researcher sees as relevant to the research question”.

The analysis of the quantitative data was done by calculating frequency statistics. Data was analysed through frequency counts, which refers to a system of transforming information obtained from questionnaires into numbers by counting the number of participants who give a particular answer (Tuckman, 1998). These frequency tables (i.e. percentage of participants in agreement) are used to complement the qualitative data.

The majority of participants (773 learners, 17 school counsellors) completed questionnaires, whilst ten school principals were interviewed. In an attempt to make sense of the qualitative data, thematic analysis was used to make meaning of the experiences of the participants whose stories needed to be told. Braun and Clarke (2006, p. 79) define thematic analysis as “a method for identifying, analysing and reporting patterns (themes) within data”. It minimally organises and describes data set in (rich) detail. Thematic analysis involves searching across a data set, be that a number of interviews or focus groups, or a range of texts, to find repeated patterns of meaning (Braun & Clarke, 2006). Ryan and Bernard (2003) describe themes as abstract constructs that link not only expressions found in texts but also expressions found in images, sounds and objects. *A priori* themes are themes identified in advance which involve deductive reasoning from a general principle and help people make inferences from general principles (Oxford Dictionaries, 2011). According to Ryan and Bernard (2003), “*a priori* themes come from the characteristics of the phenomenon being studied; from already agreed on professional definitions found in literature reviews; from local, common-sense constructs; and from researchers’ values, theoretical orientations, and personal experiences”. The advantage of using *a priori* themes is that they can accelerate the initial coding phase of

analysis, which is normally very time-consuming. The danger of using themes is that by focusing on data that fit the *a priori* themes, one can overlook material that does not relate to them. Also, the researcher may fail to recognise when an *a priori* theme is not proving to be the most effective way of characterising the data. The ‘predetermined’ key research question pertaining to the perceptions of learners, school counsellors and principals of School Psychological Services provisioning in selected secondary schools in KwaZulu-Natal is responded to in the following *a priori* themes:

- Understanding of School Psychological Services and their effectiveness in promoting learners’ well-being and academic performance;
- Learners’ needs for Psychological Services;
- The current status of School Psychological Services (including the availability of various forms of Psychological Services and nature of the services);
- The challenges affecting the delivery of Psychological Services.

In this process the data were treated as one body, that is, with no distinction between the participants. In the thematic coding, responses of 773 learners, 18 counsellors and 10 school principals were transcribed and collected under each theme. In this way some of the differences between the participants were lost; however, the formation of patterns across the responses was highlighted.

It is important to point out that even though themes were used, the participants’ understandings of Psychological Services is somewhat context-based and subject to a variety of interpretations.

4.11 Ethical considerations

De Vos *et al.*, (2002, p. 63) define ethics as “a set of moral principles that are suggested by an individual or group, are subsequently widely accepted, and offer rules and behavioural expectations about the most correct conduct towards experimental subjects and participants, employers, sponsors, other researchers, assistants and students”. Ethical guidelines also serve as standards and as the basis on which each researcher ought to evaluate his own conduct. Liamputtong (2007, p. 24) describes ethics “as a set of moral principles that aims to prevent researchers from harming those they research”. Simply put, they should serve as the researcher’s conscience and moral compass. Lack of commitment to ethical considerations could adversely affect the credibility of the research, the autonomy of the researcher, the quality of the research or the rights of the participants.

In order to meet these requirements, I obtained permission from the university to conduct the study (*Appendix B*). The Higher Degrees Committee and the University Ethics committee requested the research proposal, assessed it using set criteria and were satisfied that the study met all the ethical requirements and would be beneficial to education in general. They also studied the data collection instruments, in this case, the questionnaires and the interview schedule and gave permission to administer them. The Department of Education also made their own evaluation of the proposal and the questionnaire and the interview schedule and gave me permission to access schools in the Umlazi and Pinetown Districts (*Appendix A1*). The ethical issues referred to in this case are: confidentiality, duty to inform, causing no harm to subjects or participants, informed consent, voluntary participation, no violation of privacy, release or

publication of the findings, and the debriefing of subjects or participants. I sent letters to school principals (*Appendix G*) to inform them about the nature of the study, specify the number of educators and learners required per school, and made them aware of the fact that he had secured departmental permission from the DoE to conduct the study. Both the Department of Education (DoE) and the University of KwaZulu-Natal (UKZN) recommended that I take cognisance of the ethical considerations regarding the use of humans in a study and, to comply, I had to do the following:-

- the purpose of the study was explained to participants before the study was carried out,
- I made sure that I did not disrupt the schools' programme,
- educators', learners' and principals' anonymity was respected,
- a promise of confidentiality and an assurance that there were no right or wrong answers,
- no educator, learner, and principal was coerced to participate in the study,
- learners were not withdrawn during examinations or tests,
- educators, learners, and principals were allowed to withdraw from the study at any stage of the research, and
- learners' parents had to complete and sign the consent form giving me permission to interview children (*Appendix H*).

De Vos *et al.*, (2002, p. 75) contends that “the right of social scientists to study whatever they deem to be of scientific interest is fundamental in a free society”. This also implies that it is the researcher's responsibility to ensure that the relevant investigation meets all the ethical requirements. Any study of living organisms, especially humans and animals, has to be ethically sound and ensure that nobody is subjected to any physical or psychological discomfort.

4.12 Results of the Pilot study

Although a pilot study is an essential prerequisite meant primarily for assessing feasibility, data generated can be incorporated into the main study. One of the objectives of the qualitative component of this research is to learn about participants' experiences of School Psychological Services. The pilot study sample comprised of 25 learners from four different schools, 2 school counsellors and 3 educators, giving a total of 30 participants.

The pilot study was focused on the following research questions:

- What are participants' understandings of school psychological services?
- What are participants understanding of learners' needs for psychological services?
- What is the current state of School psychological Services?
- What challenges impact on the provision of School psychological Services?

In the process of analysing data collected from the pilot study I was mindful of the limitations of using a questionnaire. One such disadvantage is faking, where participants deliberately give inaccurate responses, either to please the researcher or provide a negative picture, depending on the purpose of the study and the consequence of the results (McMillan, 2000). However, the pilot provided an opportunity to obtain some pertinent information regarding School psychological Services. It was useful in sharpening the focus of the study and refining the research instruments. Thematic analysis was employed thus:

4.12.1 Participants' understandings of School Psychological Services

Participants, especially school counsellors, indicated a fair understanding of School Psychological Services and their impact on learners' general well-being. Whilst some described SPS as *“services meant to help learners with problems”*, others hinted they were *“services to promote learners' well-being”*; and *“services provided by qualified school counsellors and psychologists”*. This demonstrates that participants have some idea as to what psychological services are about and what they are meant to accomplish. However with statements such as *“our learners have so many issues affecting them”* (School Counsellor 1); *“We need someone other than our parents and friends to talk to when we have problems”* (Learner 4), *“School should have a programme that would influence behavioural changes in learners”* (School Counsellor3) participants expressed some desperation with which such services are needed to assist learners deal with personal issues. This is supported by the DoDea Manual (2946.4, 2001) and Elliot and Witt (1986) who posit that the purpose of Psychological Services is to promote mental and physical wellness and facilitate learning of students by increasing their capacity to overcome academic, personal, and social problems that could hinder their attainment of educational success. Participants also associated School Psychological Services (SPS) with school guidance and counselling, and most felt it was one and the same thing. Since the latter is no more, participants saw SPS as re-formulated and re-configured school guidance and counselling. Generally, their responses were not far-fetched or remote and I was satisfied that participants have demonstrated some understanding of the concept hence I felt the need to explore the matter further, on a larger scale.

4.12.2 Participants' understandings of learners' needs for School Psychological Services

As follow-up to participants' understandings of School Psychological Services (SPS), I deemed it important to gain some understanding as to how such services would meet 'adolescent' learners' needs. Participants presented varying perceptions of adolescence as *"A difficult phase of development"*; *"They are rebellious children who enjoys challenging authority"*; *"Children at cross-roads who are very inquisitive"*; *"Children in search for an identity"*; *"Children who are more exposed to external influences"*. This shows that adolescence is still being considered by many as a difficult developmental phase, a period of heightened vulnerability to some forms of psychological disorder. This is corroborated by Sigelman and Rider's (2006) statement that adolescents have a far worse reputation than they deserve as significant mental health problems affect about 20% of adolescents. Learners indicated that they needed someone to confide in thus *"We need someone to talk to when we have problems, whether academic or personal"*. If adolescence is as challenging as most people portray it, then it is inconceivable that there is nobody in schools who will offer them psychological/emotional support. Hence, participants indicated that there was a need for school counsellors to assist learners with a variety of personal issues. According to Thuneberg (2007) the basic fulfilment of learners' needs and self-regulation is related to their academic performance, and as White (2004) points out, a school that provides a stable and structured environment and warm nurturing educators will see greater academic and social achievement by those learners. Although they had lifeskills education as part of the Life Orientation curriculum, participants generally felt that it was not enough as it does not entail the provision of personal counselling.

This is consistent with Rooth's (2005) view that Life Orientation educators need psychological support as it deals with affective dimensions of the self – feelings and emotions – and educators often have to deal with learners sharing their traumas and problems and in need of support in coping with that. Participants identified issues which they felt School Psychological Services could address, including issues such as HIV/AIDS, sex education, school violence, bullying, sexual harassment, rape, learner discipline, career guidance, substance abuse, suicide, satanic rituals, corporal punishment and so forth. Among the services participants identified as being vital for learners' development was a need for career education, a need for counselling, a need for sex education, a need for life skills education, and a need for specialist intervention. A School Psychological Services programme being promulgated in this study encompasses these as intervention strategies. Although participants, mostly learners, had no idea of the technicalities of how the services would meet or address these needs, they generally showed some faith in the capacity or potential of School Psychological Services to do just that.

4.12.3 The current status of School Psychological Services

The majority of participants indicated that they did not enjoy the benefits of School Psychological Services though they are a 'must have' which all learners should be exposed to. Even though school counsellors and educators generally indicated that they had a programme in place to address the needs of learners, these could not be reconciled with learners' negative sentiments thereabout. When many learners indicate that "*We do not have such psychological services in our school*" that is not a matter to be taken lightly and presupposes a desire to have such services implemented. The main reason for the lack of psychological services is, according

to learners, because they do not have school counsellors, which was expressed thus: *“Learners need counsellors when they are experiencing problems”* and *“Schools should have a full-time counsellor”*. I think the difference in participants’ sentiments was because educators and counsellors felt that they were doing a ‘good job’ whereas learners felt they, ‘with good intentions’, were not.

Participants indicated that the Life Orientation curriculum is designed to equip learners with skills to deal with life’s challenges. Life Orientation is mainly a psycho-educational service meant mainly to equip learners with skills to handle life’s challenges (Department of Education, 2003b; Rooth, 2005). It provides them with factual information about things and what to do in certain situations e.g., conflict resolution or writing a CV, but does not address learners’ personal problems. This is due to the fact that there are no counsellors in schools and the curriculum does not include guidance and counselling skills. As some learners put it:

“When we have problems we have no one to talk to” “Some of us are victims of abuse and bullying and talking to someone can ease the pain” “We do not need LO in matric but guidance and counselling”.

Despite this, the Life Orientation curriculum dealt with some of the topics participants identified, for example, career education, sex education, life skills education, substance abuse prevention, violence and bullying. The school, according to participants, does not seem to provide support to learners with learning difficulties, victims of violence, depressed and traumatised learners and those who are suicidal. In order to compensate for the lack of services, as one educator indicated,

“in most instances learners with problems get help outside the school”. This means that making referrals is considered by most schools as one way of ensuring that learners access psychological support for matters affecting them. Some participants indicated that Guidance and Counselling should be offered concurrently with Life Orientation, as Learner5 put it, *“Guidance and Counselling should be offered in secondary schools”*. This coupled with a sentiment such as: *“We need counselling services for learners with problems”* (Learner 7) shows the urgency with which such services are needed in schools. Although the Department of Education introduced and implemented Inclusive Education, the difference is not being felt in how the system benefits learners with learning difficulties and learning disabilities. One question posed by a school counsellor to prove the point was *“How many educators in full service schools can use sign language?”* These were some of the issues that, in my opinion, needed to be probed on a larger scale, specifically how such activities benefitted learners and the education process in the end.

4.12.4 Challenges affecting the delivery of Psychological Services

Pilot study participants indicated that there were challenges with the delivery of School Psychological Services, and most felt that they were not getting ‘a good deal’. Apart from not having the services, participants indicated that their schools did not have qualified school counsellors. School Counsellors and teachers felt that, qualified or not, they were capable of helping learners with any issues affecting them. Learners, on the other hand, mostly understood that although teachers were trying to help learners with problems, a more qualified person should be handling that. Learners indicated that Life Orientation educators were incompetent to offer the subject/learning area. This confirms research findings which argue that attending a three-day

workshop does not make one competent enough to offer Life Orientation (Rooth, 2005; Prinsloo, 2007; Van Deventer, 2008).

Pilot study participants identified resources (personnel, material resources, financial and physical resources) as a major challenge in the provision of Psychological Services. Apart from the school counsellor or psychologist, there is need for material resources, financial resources, physical resources, such as an office for student consultations. Learners cannot be expected to talk about their troubles in a classroom in full view of other people. Clients have a right to a private space (so no one can see or hear a counselling session) and privacy (absence of non-significant others) during counselling (CEHAT, 2012)

Another concern raised by participants, mostly school counsellors, is that they have a teaching role, offering mostly Life Orientation. This gives them very little time to attend to learners' problems and makes learners, on the other hand, feel that consulting them is a waste of their time. According to Howieson and Semple (2000), a counsellor without a teaching load would be a much better option. This would afford them enough time to interact with learners, attend to their problems and compile a psychological report.

Although learners know about School Psychological Services, they do not know if the services are available in their schools and how to access them. Hence, many learners seek help outside the school, if they can afford it. However, since most learners cannot explore this option, their difficulties fester and negatively impact on their academic performance. Fox and Butler (2007) caution that simply knowing that the services exist is insufficient as learners need to know what

counselling is, who the counsellor is, what he or she does, and how to make an appointment. Still, to compensate for the lack of services, referrals can be made for learners to consult mental health professionals outside the school.

Also, School Psychological Services are ineffective mainly because learners' parents are not involved. For example, schools cannot handle disciplinary problems such as violence and bullying effectively without the support and participation of parents. As School Counsellor⁴ remarked "lack of parental involvement is the main reason why schools are not doing well". According to Hughes (1985), this is a prerequisite for the effective and efficient implementation of the Psychological Services programme as their cooperation is crucial for children to derive maximum benefits from the programme.

Participants had to indicate if they agreed that questionnaire items were obstacles to the effective implementation of School Psychological Services. Prominent among the challenges were:

"Scarcity of resources" "The lack of qualified school counsellors" "Career education not being offered" "Lack of support for learners infected or affected by HIV and AIDS" "Non-existent substance abuse prevention and school violence policies" "Inadequacy of life skills to equip learners with skills to handle problems" "Lack of psychological support for learners with emotional problems".

Issues such as bullying, sexual exploitation of young girls, substance abuse are mostly dealt with as a class discussion without necessarily addressing the needs of victims who need more emotional support. The lack of career guidance is one issue which is related to lack of trained

personnel. It was also participants' sentiment that career guidance should be offered by someone more knowledgeable about careers and the impact of the economic forces on learners' career choices. The delivery of sex education was also raised as an issue of concern as young people indicated that their educators were feeling like they were 'out of their depth' and were not confident of success in equipping youth with knowledge of safe sex and inculcating the right attitudes to effect behavioural changes. As one learner said: "*educators are not comfortable to talk about sex*" (Learner2). This can be due to cultural influences which make sex a taboo topic to some (Vincent, 2007; Gilbert, 2007; Fox & Butler, 2007). Despite this, adolescents need age-appropriate information about sex in order to make responsible decisions and the skills and confidence to delay sex until they are ready.

Although I felt that I was somehow 'groping in the dark', sentiments of pilot study participants energised me to want to gain a clearer understanding of how learners, principals, teachers and school counsellors perceived School Psychological Services and how they benefitted learners and challenges they experienced. The results of the pilot were encouraging but indicated a need to improve School Psychological Services and the effective delivery of certain vital services, the bread and butter issues such as school violence, career guidance, sex education, and counselling services for depression and trauma.

4.13 Conclusion

In chapter four, I have presented the following:-

- the research design and methodology used in the study,

- a description of the population for the study and a delimitation of the sample extracted,
- a discussion of the sample characteristics,
- an explanation of the research instruments, their reliability, validity, trustworthiness,
- a description of the themes,
- a discussion of the necessary ethical considerations, and
- an exposition of the results/findings of the pilot study.

Chapter Five presents the findings of the study.

CHAPTER FIVE

PRESENTATION OF FINDINGS

“I continue to believe that if children are given the necessary tools to succeed, they will succeed beyond our wildest dreams” (David Vitter, US senator, 2010)

5.1 Introduction

The study was aimed at gathering adolescent learners’, school counsellors’, educators’ and principals’ perceptions regarding learners’ needs for Psychological Services, the nature of existing Psychological Services, the relevance and effects of services on academic performance and challenges to proper implementation of School Psychological Services.

The study is guided by one primary research question which is:

- What are participants’ (viz., learners, school counsellors, educators and principals) experiences of School Psychological Services provisioning in selected secondary schools in Kwazulu-Natal?

The sub-questions which underpin the above research question are:

- a) What are participants’ (viz., learners, school counsellors, educators and principals) understandings of Psychological Services and their impact on learners’ well-being and academic performance?
- b) What are learners’ needs for School Psychological Services as identified by participants (viz., learners, school counsellors, educators and principals)?
- c) What is the current status of Psychological Services (including the various forms of School Psychological Services and resources) in the selected secondary schools?
- d) What are the challenges or obstacles to the effective implementation of Psychological Services in the selected schools?

In my attempt to address the above-mentioned research questions, I used a multi-site mixed methods exploratory study approach, underpinned by the interpretivist paradigm, focusing on gaining insight into participants' experiences of School Psychological Services. Seventeen high schools in the region encompassing both the Umlazi and Pinetown districts, participated in the study. The two theories I deemed relevant to the study was social constructivism and the ecosystemic perspective, and in the presentation of findings, reference will be made as to the relevance of the theories in making sense of the findings. The findings will be presented in the form of the themes identified, and will merge both quantitative and qualitative data (i.e. mixed methods) to respond to the research questions.

5.2 Findings of the study

In an attempt to reduce, organise and interpret data generated by interviews, questionnaires, thematic analysis was used. Data analysed hereunder includes learners' and school counsellors'/teachers' samples as they both took questionnaires. Thus, data was presented as frequency tables which were generated by the SPSS software programme and helped me categorize and analyse data. Each theme was targeted at the research questions.

The themes are as follows:

- ◆ Participants' (viz., learners, school counsellors, educators and principals) understandings of Psychological Services and their impact on learners' well-being and academic performance
- ◆ Learners' needs for School Psychological Services as identified by participants (viz., learners, school counsellors, educators and principals)

- ◆ The current status of Psychological Services (including the various forms of School Psychological Services and resources) in the selected secondary schools
- ◆ The challenges or obstacles to the effective implementation of Psychological Services in the selected schools

Although they are discussed separately, the themes are closely intertwined in such a way that the one influences the other. Also, due to the fact that both school counsellors/educators and learners completed questionnaires I have decided to present their results side-by-side, with frequencies (i.e. percentage of agreements) presented in tabular form. Overall, data analysis seems to confirm that psychological services are in a state of disarray for various reasons, including lack of qualified personnel, inadequate training of Life Orientation educators, vis-à-vis, the provision of psychological support including counselling, staff incompetence to deliver services such as sex education and career guidance, and lack of clear policy directives and support from the Department of Basic Education.

5.2.1 Participants' understandings of school psychological services and their impact on learners' well-being and academic performance

It is important, as starting point, to gauge participants' (school counsellors, educators, learners and principals) understandings of School Psychological Services as such understandings also influence whether and how such services were used. Data for this section is drawn from part two of the questionnaires and complemented by part two of the interview schedule. Two questions form the gist of this theme, viz. '*What is your understanding of school psychological services?*'

and ‘Do you think that there is a relationship between psychological services and learners’ academic performance? Why so?’

Table 5.1 below provides a summary of the findings from the two samples, namely, School Counsellors and learners. Data was analysed through frequency counts, which refers to a system of transforming information obtained from questionnaires into numbers by counting the number of participants who give a particular answer. The percentages reflected in the tables are those of the “Yes” responses (i.e. percentages in agreement). As discussed under data analysis (c.f. 4.10) qualitative data was converted into frequency statistics by using the SPSS programme.

As evident in the discussion below, participants’ understandings of psychological services varied greatly. Whilst the majority conceptualised of Psychological Services as consisting of guidance and counselling only (70%) – a convergent but limited understanding – others thought of psychological services as a package of services meant to enhance learners’ well-being, which are inclusive of guidance and counselling; Life Orientation; sex education; substance abuse prevention and Life Skills education. This corresponds with the fact that Psychological, Guidance and Special Education Services (PGSES) or Psychological Services is a relatively new introduction in the realm of education in South Africa. However, 100% of counsellors, and 70% of learners indicated that psychological services are meant to promote learners mental health or psychological well-being, which corroborates Elliot and Witt’s (1986, p. 3) assertion that Psychological Services are for the “protection and promotion of mental health and facilitation of learning”. The well-being, according to participants, is achieved through the services of the counsellor in addressing emotional problems so learners can perform well academically.

The categorised responses from the questionnaires below are some of the sentiments expressed by participants (i.e. learners, educators and school counsellors) regarding their understandings of school psychological services:

Table 5.1: Participants' understandings of Psychological Services and their impact on learners' well-being and academic performance

QUESTIONNAIRE ITEM	SCHOOL COUNSELLORS		L E A R N E R
	N=17	N=773	
UNDERSTANDINGS OF SPS			
Psychological services promote learners' mental health or psychological well-being	100%	70%	
Psychological services include guidance and counselling	71%	64%	
Psychological services are there to help learners with learning problems	75%	82%	
IMPACT OF SPS ON WELL-BEING & AND ACADEMIC PERFORMANCE			
There is a relationship between learners' well-being and academic performance	100%	90%	
Problems, if unresolved, have a negative effect on learners academic performance	100%	72%	
Psychological services have a positive impact on learners' well-being	100%	90%	

As services for psychological and emotional problems:

Services which attend to learners' psychological needs
It prepares learners to handle issues affecting them
Services for learners with serious psychological problems
These are services for learners with serious personal problems
Services to make learners better equipped to handle life's challenges
Services meant to promote learners' well-being
Services which enhance learners' emotional growth and development

As services to provide learners with academic support:

*Services which learners can have easy access to in order to perform well academically;
Services which helps learners with psychological issues affecting their studies.*

As services offered by a qualified professional who knows what they are doing:

*They are services provided by the school counsellor to help learners focus on their academic work;
Services provided by the school counsellor to learners; and
Services by a qualified school counsellor or psychologist to help learners in school*

As an aspect of the school curriculum:

It refers to Life Orientation and school guidance and counselling

There is an inferred relationship between emotions and education – especially academic performance – as demonstrated by Schutz and Lanehart (2002) when they assert that “emotions are intimately involved in virtually every aspect of the teaching and learning process and therefore, an understanding of the nature of emotions within the school context is essential” (Schutz & Lanehart, 2002, p. 67). But as only 29% of learners indicated, their schools offered Psychological Services, which means that most of learners’ emotional problems are kept out of the classroom. The majority of participants (100% counsellors and 93% learners) indicated that there was a need for Psychological Services in schools, and these were some of the reasons behind their assertions:

To support learners with emotional problems:

*Standards of learner behaviour have deteriorated, with more social problems
Learners have social, emotional and academic needs which schools should meet
Learners have serious academic and emotional problems
Learners have problems that affect their learning
For learners with academic and emotional problems*

To equip learners with skills to handle difficult situations:

We need guidance and counselling to facilitate learners' social and emotional growth
There are high levels of trauma and abuse
Teachers are not equipped to handle certain serious problems
Most of our learners have serious problems

To provide learners with career guidance:

There is a huge need for career guidance in high schools

Participants unanimously agreed that their schools offered psychological services, though differences emerged when they were asked to identify the services their schools offered, as evident under theme three (c.f. 5.2.3). Evidently – in spite of their differences in opinions – participants have some ideas as to what school psychological services are and what they are meant to achieve, which is to foster learners' mental health. Generally, they conceptualised of Psychological Services as practices meant to foster behavioural and lifestyle changes which would enable learners to focus on their academic performance. Psychological Services are seen here as both direct and indirect services (c.f. Figure 2.2, p37) meant to benefit learners by attempting to satisfy their needs and directly and indirectly influence their academic performance. Participants seem to understand that school Psychological Services are direct services which are meant to help clients and they include testing, guidance and counselling, behaviour modification, and intervention programmes for learners with learning problems.

The responses given by participants under this theme resonates with Lang's (1999, p. 28) definition of an 'affective' school, which is "a place where the ethos and the approaches used in the classrooms and elsewhere encourage the acknowledgement and handling of feelings and seek to create safe situations in which learners will develop the confidence to talk openly". This creates a caring community, where learners feel valued and teachers have a positive attitude and are realistically optimistic about the future. It is not just a caring school, but a proactive site which does not just look after pupils but seeks to offer safe opportunities for them to develop their emotional intelligence (*ibid*, p. 30).

Concerning participants' experiences of school psychological services and their impact on learners' academic/scholastic performance it is important to state that the study did not measure the impact but investigated participants' perspectives on the efficacy of Psychological Services. There are both direct and indirect services which have an impact on learners' academic performance. Services that have a positive effect on learners' general well-being are very likely to improve on learners' scholastic performance. According to Van Petegem, Creemers, Aelterman and Rosseel (2008, p. 452), "there is relationship between well-being (affective output) and academic achievement (cognitive output), which creates a 'positive or good' cycle, according to which high achievement scores increase student well-being. This helps create better student motivation which again leads to higher achievement scores". In the same vein, Kitzrow (2009, p. 650) found that "high levels of psychological distress among college students were significantly related to academic performance. Students with higher levels of psychological distress were characterised by higher test anxiety, lower academic self-efficacy, and less effective time management and use of study resources". The assumption being made in this case

is that there is a positive correlation between the provision of psychological services and academic performance. This means that if psychological services have a positive impact on learners, their academic performance and general behaviour has to improve. As shown in *Table 5.1* above, counsellors unequivocally (100%) indicated that there is a relationship (or positive correlation) between the psychological well-being of learners (i.e. being content, happy and free of serious emotional problems) and their academic performance. Learners (90%) were in agreement, possibly due to limited understanding of concepts ‘well-being’ and ‘academic performance’ or that there is a link between the two. These were some reasons given for their assertions:

Participants, mostly learners, saw problems as a distraction and have a potential to negatively impact on learners’ academic performance. This is what they said:

Learners preoccupied with problems cannot focus on their school work
Learners who have psychological problems perform poorly
Having problems affect learners' focus and negatively affects their performance
It is impossible for emotionally disturbed learners to do well in their studies

As participants indicated, a good mental state is what learners need to perform well. These were some of their responses:

If psychological well-being is not right, the mind-set is not right
Learners' ability to concentrate is definitely affected by emotional issues
Children without hang-ups perform better than those with problems
Happy learners are better motivated and perform well
A well balanced and happy learner is more motivated to learn

Strong emotional support enables learners to do well academically, as participants indicated:

“Emotionally distressed or traumatised people cannot concentrate and learn to their full potential”;
“Psychologically disturbed learners cannot perform to their level best”;
“Learners with strong support always do well than those who do not have it”

Counsellors unanimously (100%) indicated that school Psychological Services have a positive impact on learners' well-being and behaviour. Evidently, as indicated by 100% of counsellors and 100% of students, problems can have a negative influence on learners' academic performance if not properly dealt with.

All the above – both intrinsic and extrinsic – have a positive effect on learners' well-being and academic performance. As Brendtro *et al.*, (1990: 35) put it, “fostering self-esteem is a primary goal in socialising normal children as well as in specialised work with children and adolescents at risk. Without a sense of self-worth, a young person from any cultural or family background is vulnerable to a host of social, psychological and learning problems”. Hence, Gilligan (1998) posits that positive school experience may foster, in quite a central way, the child's sense of self-efficacy and resilience.

5.2.2 Participants' perception of learners' needs for School Psychological Services

Marais (1998, p. 145) defines a need as “a biological or psychological requirement; a state of deprivation that motivates a person to take action toward a goal”. This theme focuses on participants' perceptions of learners' needs for psychological services and their potential benefits to learners. Psychological services are there for learners' benefit and are meant to promote learners' well-being. Needs assessment is important in the establishment of goals and objectives of effective psychological services.

Services which are part of the School Psychological Services programme are career education, health education (including HIV and AIDS education), guidance and counselling, sexuality education, inclusive education and learner support, life skills education, social welfare services (including nutrition programmes and interpersonal relationships). Learners also need assistance with information on how to handle substance abuse, peer pressure, bullying, domestic violence, and many other socio-economic concerns. It is important as part of this theme to understand learners' own perception of Psychological Services and what they are meant to accomplish. Problems that are directly and indirectly linked with or caused by lack of School Psychological Services can be highlighted under this theme, e.g. substance abuse, depression, suicide, teenage pregnancy, poor scholastic performance etc. (*Appendix L*, provides a list of learners' needs and the resources needed to meet them)

Secondly, this theme is about educator-counsellor's perception of learners' needs concerning Psychological Services and their understanding thereof. Counsellors' participation in the dissemination of School Psychological Services is essential for the discharge of quality and effective Psychological Services. Hence, it is important to understand their perception of learners' needs and concerns and how they impact on educators' ability to carry out their responsibilities. It is important to get counsellors' opinion on the different Psychological Services and how they can be accessible to all learners, with or without learning disabilities. Counsellors' understanding of the relationship between the availability of Psychological Services and learners' well-being is also relevant to this theme. Establishing whether or not there is a need for Psychological Services in schools and how that can benefit learners is important in this

theme. Data for this section is drawn from Part Three of the questionnaires as well as from the interview schedule.

One key characteristic of qualitative research, according to McMillan (2000), is its focus on participants' understandings and meaning. The following questions form the basis of this theme:

- What are participants' understandings of adolescence?
- What are participants' views on adolescent learners' needs for Psychological Services?
- What are the Psychological Services offered in schools to service these needs?

A summary of data is provided in Table 5.2 below:

Table 5.2: Participants' perception of learners' needs of Psychological Services

QUESTIONNAIRE ITEM	SCHOOL COUNSELLOR N=17	LEARNER N=773
Learners need psychological services	100%	93%
Learners need career information	100%	89%
Learners need skills to handle traumatic experiences	89%	68%
Learners need problem-solving skills	100%	76%
Learners need help with relationship and interpersonal skills	82%	62%
Learners need to be educated about drugs	71%	72%
Learners need skills to handle peer pressure	89%	70%
Learners need skills to be assertive	89%	64%
Learners need self-esteem enhancement skills	82%	75%
Learners need counselling for anxiety and depression	100%	68%
Learners need help with academic problems	76%	75%
Learners need sex education	94%	90%

Of utmost importance is participants' general perception of adolescence as a phase characterised by identity formation, curiosity, rebelliousness, unpredictability and upheavals which is fraught with developmental challenges. This is consistent with the turmoil theory or 'storm and stress'

model view of adolescence as a period of heightened levels of psychological or mental problems, a difficult phase fraught with many developmental challenges (Tartar, 2001; Sigelman & Rider, 2006; Gouws *et al.*, 2000; & Louw, 1991). This is evident in participants' descriptions of adolescence:

As a developmental phase fraught with problems:

*"A phase full of problems and developmental challenges";
"A difficult phase of development";
"Children at risk and who pose a danger onto themselves";
"Children who experience a lot of problems but are reluctant to seek help"
"This is the age when they deal with complicated situations and they need help",
"They are rebellious children who enjoy challenging authority"; and
"Most adolescents are troubled and need help all the time"*

As children who are always at loggerheads with parents:

*"Kids who are always testing their parents' patience";
"The phase characterized by rebellion against rules";
"These are children who are always looking for trouble"
"They believe in their peers and trust them more than their own parents"; and
"They are young adults and think they have all the answers".*

As vulnerable youngsters in need of emotional support:

*"Children who need help to be focused";
"Children who need more adult intervention than others";
"Children at cross-roads who are very inquisitive";
"They are more exposed and gullible to external influences"*

As young people in need of adult intervention:

*"Children without a sense of direction and who need adult intervention";
"Learners who need more guidance than others";
"Children in need of adult guidance and supervision";
"Children between the ages of 12 and 20 years old";
"Children in need of answers to the question: Who am I?"
"Some students commit suicide because they have nobody to talk to"
"The phase during which teenagers discover themselves"*

The descriptions given above corroborate Sigelman and Rider's (2006) view that significant mental health problems characterise adolescence, hence the need for School Psychological Services. The view is further entrenched by Petersen *et al.*, (2010, p. 336) when they posit that "adolescence is typically associated with a greater likelihood of engaging in experiences and behaviour that may impact negatively on their life course and mental health, such as drug and alcohol abuse, non-consensual and high-risk sexual behaviour, self-harm, interpersonal violence and criminal behaviour". According to 88% of counsellors and 80% of learners, learners need more guidance and counselling in adolescence than in any other developmental stage. It is common during this phase for learners to grapple with issues around their personal identity, initiating and maintaining relationships, substance abuse issues, violence and crime, depression and suicide, commercial responsibilities and health issues, such as HIV and AIDS. All these issues impact on learners' academic performance.

Using the constructivist and interpretive ideologies employed in this study, I wanted to understand how learners construct meanings from their experiences of School Psychological Services as the theme focuses on learners' perceived needs regarding school Psychological Services programme (c.f. 2.4). Psychological Services are there for learners' benefit and are meant to promote learners' well-being. Services such as career education, health education (including HIV and AIDS education), guidance and counselling, sexuality education, inclusive education and learner support, Life Skills education, social welfare services (including nutrition programmes and interpersonal relationships) are meant to cater for learners' needs.

Participants indicated the following as adolescents' needs for Psychological Services:

The need for counselling; need for study skills; need for problem-solving skills; need for interpersonal skills; need for life skills and skills to handle peer pressure; need for self-esteem enhancement; need for sex education, and need for someone to talk to or confide in.

Learners' need for information, including career information:

Counsellors were also unanimous (100%) that learners needed career information, as education naturally culminates in learners being able to choose both their professional and economic roles. Specifically, according to 89% of learners – mainly 18 years old and the majority female – all learners need information about careers. This becomes more pertinent as they begin to think about their future and make plans about the roles they wish to play. However, the lack of career education in schools means that learners are not well equipped with adequate information and appropriate skills for career decision-making. Information about career paths and skills required is invaluable for learners to make informed career choices. This includes information about subject choices, career planning, applying for financial aid, CV writing skills, job searching skills, and how to handle interviews. Equally important, 88% school counsellors and 88% of learners indicated that learners needed study skills (academic assistance) to improve their academic performance.

Learners (78%) indicated unequivocally that Psychological Services are meant to provide them with information to make 'informed' choices in life. Making a choice is a learned skill which can

be a source of anxiety, especially when young people have to choose between two equally appealing needs (Swartz, *et al.*, 2011). Choices can include relationships and dating, issues around sexuality and engaging in sexual activity, peer pressure, and so forth. Information is invaluable to all learners, is empowering and affords young people control over their differing circumstances (*ibid*). According to Julien (1999), there is still a large gap in information service delivery, which negatively affect learners' career decision-making. There is also a disconnection between the availability of jobs and the careers young people choose (Hurley & Thorp, 2002).

Learners need for sex education

According to 94% of counsellors and 90% of learners, learners need sex education to help them make important decisions regarding their sexuality and healthy sexual practices. Teenagehood is about discovering own identity and experimenting sexually is an important part thereof. Sex education will simultaneously provide them with information about sexually transmitted illnesses such as HIV and AIDS and the dangers of early sexual experimentation. It will also help them deal with the social pressure of dating and engaging in sex before marriage. Sex education must not focus on the transmission of factual information but on the acquisition of skills. This becomes even more relevant as sex is considered a taboo topic for many families, more so to African families.

The need for psychological support after experiencing traumatic events:

Learners' other needs for Psychological Services, according to 68% of learners and 88% of counsellors, include help and support in dealing with the aftermath of their traumatic experiences due to violence in schools and their surrounding communities, and deaths due to HIV and AIDS.

On this note, 48% of mostly African learner participants indicated that they have witnessed or suffered traumatic experiences, death being the major cause of trauma, followed by violent attacks such as rape and homicide, robbery and stabbing. Often victims of trauma experience flashbacks which are one of the symptoms of PTSD. Consequently, adolescents' depression and suicide rates are escalating. Recent spate of violent acts amongst learners (Tribune Herald, 13/11/2005; Daily Sun, 28/02/2008 & eTV, 26/02/2009) are proof of the fact that we are a violent nation – with the result that incidents of bullying and maiming are common in our schools. Acts of violence and bullying can be attributed to unhealthy environments and destructive relationships. The violent nature of our society creates vulnerable, paranoid and edgy young people who are prone to get into a defensive mode when they feel threatened. It is common knowledge that drugs and belonging to gangs exacerbates the issue.

The need for life skills education

Learners (76%) indicated that they needed to develop problem-solving skills. This would make sense as challenges such as teenage pregnancy, peer pressure, violence (including bullying and domestic violence), HIV and AIDS, suicide and substance abuse, confusion as to their future career, domestic problems, poor academic results, etc. are issues that confront adolescents on daily basis and have a potential to cause emotional problems to learners, which schools should be able to do something about. These emotional problems can manifest as fear, anxiety, sadness or unhappiness and depression. In this case Life Skills will teach young people to be resourceful and resilient in the face of adversity. This presupposes that Life Skills education and health education have to be part and parcel of the school Psychological Services programme. According to the Programme on Mental Health (1997, p. 4), “life skills play an important role in the

promotion of mental well-being. The promotion of mental well-being among youth, in return, contributes to motivation to look after themselves and others, the prevention of mental disorders, and the prevention of health and behavioural problems”. Prevention is an important part of the work of school counsellors and psychologists and includes a range of ‘before the fact’ interventions, rather than ‘after-the fact’ remedial efforts. In South Africa, a national lifeskills programme was introduced nationwide in 1998 and fully implemented in 2005 (Petersen *et al.*, 2010). It was meant to assist adolescents cope with complex life situations, including decision-making, effective interpersonal communication, self-regulation and the pursuit of goal directed behaviour (*ibid*).

The need for relational skills:

Concerning social skills, 100% of counsellors pointed out that learners’ need to belong is paramount, consequently 62% of learners – 67% of whom were males – indicated that they needed relationship and interpersonal skills. As Patrick (1997, p. 209) puts it, “a positive association exists between students’ social competence and their academic performance, including achievement, school adjustment, and motivation for schoolwork”. It is important that learners are educated about how to establish and maintain relationships, including romantic partnerships, the formation of which is considered one of the hallmarks of adolescence. Relationships that are important for adolescents are relationships with significant others (i.e. members of their families) and their peers. This is important because adolescence is about identity formation and experimentation which includes starting new relationships. Adolescence is a transitional period that involves broadening the scope of significant relationships and relationships with peers becomes increasingly important sources of support, intimacy, social

influence and partnership (Bostik & Overall, 2007). Apart from parents and teachers, peers are important for learners and, according to Patrick (1997, p. 210), “learners’ school achievement is correlated with their peer relationships whether defined by closeness, intensity, or type of integration in peer relationships, or by a solid and influential affiliation with a group or an association”. Often adolescents are perceived as consummate rebels against authority (Gouws *et al.*, 2000). Related to relationship skills are problem-solving, decision-making, resilience, assertiveness and communication skills. Since relationships form the basis of a sexual relationship, it is pertinent that participants pointed out learners’ need for sex education.

Learners’ need for Psychological Services:

As discussed above, adolescence is a challenging phase of development which presents its unique physical, cognitive, social, emotional, and moral challenges, which if not handled properly can be destructive or counter-productive. Hence, there is a need for school Psychological Services to facilitate a smooth transition from adolescence, by equipping adolescents with skills to negotiate the challenges and overcome obstacles which have the potential to negatively impact on their well-being. Psychological Services develop and enhance adolescents’ emotional competence, the ability to identify and describe emotions, the ability to understand emotions, and the ability to manage emotions in an effective and non-defensive manner (Ciarrochi *et al.*, 2002, p. 174).

According to 94% of counsellors and 94% of learners, learners needed help when experiencing emotional problems. This, as 100% of counsellors indicated included anxiety, stress and trauma caused by violence and other socio-economic problems (e.g. bullying, rape and carrying of

dangerous weapons) for which learners needed counselling. Also, 361 (46.7%) indicated that they have experienced or witnessed a traumatic event, and such events included domestic arguments, domestic violence, death of a loved one, sexual violence (rape), failing exams, hijacking incidents, health issues and killings as a result of crime. Only learners were asked if they have thought of killing themselves, and 27.2% (210) indicated that they had, and the majority were females (57.6%), African (80%) and in grade 12 (71%). This is an indication of how helpless and depressed learners feel and how that impacts on their well-being, especially for African girls. Only 37.14% (78 out of 210) spoke to someone about their suicidal intention and plan. Learners' reasons for wanting to kill themselves included academic problems, bereavement, depression, domestic issues, failure, feeling rejected, financial problems, health issues, and termination of a relationship.

Learners needed help with study skills, as 88% of counsellors indicated. These skills would help learners improve their academic performance, thereby alleviating the academic problems, which according to 75% of learners, learners needed help with. Related to their academic performance, counsellors (50%) indicated that learners needed assistance to enhance their self-esteem. Also, as 83% of counsellors indicated, learners needed help with interpersonal relationships. These include relationships with their parents, teachers, counsellors and their peers.

The need for skills to handle peer pressure:

Peer pressure seems to pose a serious challenge to many learners in high schools hence, 88% of counsellors indicated that learners needed help with skills to handle peer pressure. This would empower learners to handle coercion and do things when they feel they are ready and resist

conforming to pressure. The abuse of drugs is in most cases the result of negative peer pressure. It is in adolescents' genetic make-up to want to feel valued and appreciated, hence, the reason to conform to peers influences. In order to achieve that, 64% of learners and 85% of counsellors felt that assertiveness skills would be useful. These skills would also be very convenient to protect learners from the temptation of using drugs. As pointed out by 72% learners – 61% of whom were males – learners need information about drugs and the danger they pose to youth. This concurs with findings of studies (Botvin *et al.*, 1990; O'Connor & Britton, 2007 & Gouws *et al.*, 2000) which maintain that the problem of substance abuse is more common amongst boys than girls. All these learners' needs make it necessary for schools to provide Psychological Services. This point is even made pertinent by 25% of learners who indicated that they have experimented with drugs in high school and 12% who indicated that they have thought about committing suicide.

The need for counselling services:

In order to address the needs of the adolescent learners listed in Table 5.2, 100% of counsellors were unanimous that there was a need for Psychological Services in schools, including guidance and counselling, to cater for the academic, social and emotional developmental needs of adolescents. Essentially, Psychological Services will equip learners with Life Skills, the skills they would need to be productive and responsible members of a community. As an important component of Psychological Services, participants indicated that learners needed a counsellor to confide in when they have serious personal problems. Some learners are HIV positive and need a constant dose of counselling. A school counsellor is someone that they could confide in, share

their burdens with and receive help. According to the Texas Guide to School Health Programs (2007, p. 271),

“possibly the most critical element to success within school is the student developing a close and nurturing relationship with at least one caring adult. Students need to feel that there is someone within the school whom they know, to whom they can turn, and who will act as an advocate for them.”

The ‘caring adult’ referred to above could be the school counsellor, the psychologist, the nurse, and the teacher, but as most participants indicated, the ‘someone’ referred to here is personified by a school counsellor or a caring educator. The Texas Guide to School Health Programs (2007) concurs with McLennan’s (1991, p. 151) finding that “troubled students seek and receive counselling help from informal sources such as trusted family members, teachers and friends; and that they are likely to seek formal counselling from professionally trained counsellors when the concerns they are experiencing are particularly distressing”. Teachers are better positioned to intervene when learners have problems in school than social workers because they know the learners in their care and can avail themselves to intervene in case of an emergency, than a stranger in the person of a social worker who is not part of the school set-up. As the Healthy Carolinians Advocates for Adolescents Committee (HCAAC, 2006, p.2) reckon, it is much easier for learners to access all types of services at school, and as they put it “*if they don’t get it at school, odds are, it ain’t gonna happen.*” The school has a role to play in promoting the healthy emotional development of all children because problems have a potential to leave youth vulnerable to psychological distress.

It is not inconceivable that all participants' samples felt that Psychological Services (including guidance and counselling and life skills education) have an important role to play in attending to the needs of adolescent learners, and that school counsellors and educators are in a better position to help learners with problems than people from agencies outside the school.

5.2.3 Current status of Psychological Services (including the nature of the available services and resources)

It is my conviction that there is no educational institution without some form of Psychological Services, though people are mostly unaware. This theme is about the current status of School Psychological Services, the nature of the services that are available and a variety of activities carried out to satisfy learners' needs identified above (*c.f. Table 5.2*) as well as the resources allocated for the endeavour. Data for this section are drawn from Part Four of the counsellors' and learners' questionnaires, and part four of the interview schedule. The theme focuses on school-based services such as guidance and counselling, career education, health education (including HIV and AIDS education), sexuality education, information services, inclusive education and learner support, life skills education/Life Orientation, social welfare services (including nutrition programmes and interpersonal relationships), study skills training, health education, sports and recreation, and citizenship education (including Human Rights issues). Some of the services are offered as standalone (or separate) services whereas some are infused into other learning areas such as Life Orientation. These school-based services are meant to attend to learners' needs and help them deal with their developmental challenges. Participants

had to identify the services that are available in their schools and how the services contribute in promoting learners' well-being, and resources that would ensure effective service delivery.

The results of the participants' responses to this theme are displayed in Table 5.3 below:

Table 5.3: Current status of Psychological Services

QUESTIONNAIRE ITEM	SCHOOL COUNSELLORS	LEARNERS
	N=17	N=773
Policy for implementation of psychological services	88.2%	64.7%
The school counsellor – for learner consultation	100%	50%
School guidance and counselling services	88%	40%
Life Orientation – for dissemination of information	100%	100%
Skills training workshops for staff	100%	54%
Career guidance	65%	30%
Information services	100%	70%
Peer counsellors	51%	61%
On-site psychological intervention	88%	48%
Inclusive education policy	100%	30%
Life skills education	88%	48%
Substance abuse prevention programme	76%	68%
School violence prevention programme	100%	92%
Remedial intervention/education	58.8%	50%
Suicide prevention programme	76%	56%
Sex education	94%	40%
Orientation services	94%	58%
Referral & placement services	82%	50%
Evaluation and follow-up services	71%	46%

Counselling services:

The results reveal that although 100% of school counsellors indicated that their schools had counselling services whereas 78% of learners indicated that their schools did not offer such services. Counsellors expressed the need for counselling services in schools for learners with serious problems, such as HIV positive learners and victims of abuse and bullying.

Unfortunately, few schools have counsellors. This is more so in former-Model C schools, which despite the rationalisation and redeployment of the late 1980's still managed to retain the guidance and counselling services. (Please note: Not all educators interviewed were school counsellors. Some were Life Orientation educators who gave themselves the title of 'School counsellor'). Seemingly, the label of school counsellors is mostly used vainly or trivially to refer to people with no training or psychology background. In spite of this, as per participants' perception, mainly counsellors, learners in only 65% (11 out of 17) of the schools were aware of the Psychological Services available. In most schools responsive services such as assessment, information, counselling, consultation, referral, placement and follow-up were offered but learners do not make use of them or have no idea how to access them.

Psychological assessments

Counsellors (100%) and learners (68%) indicated that their schools offered psychological assessments, which involves administering tests and other diagnostic tools to identify learners' problems. This means that their schools had access to diagnostic tools such as tests and rating scales to assist counsellors and psychologists in making proper diagnosis and designing appropriate intervention strategies but, as 38% of participants pointed out, their schools did not have referral services for learners to access psychologically vital services outside schools. This means that the assessments mentioned earlier were not conducted within schools. Surprisingly, as counsellors indicated, very few learners access such vital services. This could have been due to what Tatar (2001, p.214) referred to as the 'avoidance-avoidance' dilemma where learners are reluctant or feel embarrassed to talk to counsellors about their problems and out of fear of the societal stigma that accompanies that and fear of alienation, and instead choose to continue to

suffer and feel discomfort in silence. The feelings of embarrassment adolescents harbour about the idea of talking to a stranger about personal problems inhibit them from seeking help. Teenagers want to present themselves as strong, solid and impenetrable souls, not as weaklings who cannot survive or stand on their own two feet.

Career guidance

According to 100% of counsellors and 60% of learners, their schools offer career guidance, especially to learners in grades 11 and 12. This means that learners are provided with information about different careers and their subject requirements. Career guidance is one of the five focus areas of Life Orientation in the General Education and Training (GET) Band (Department of Education, 2002b), namely orientation to the world of work. The choice of a career should be based on information rather than intuition, hence the need to make ‘informed’ choices. The inadequate delivery of career guidance makes it difficult for learners to choose career paths which matches their potential or aptitudes. Participants (94% of counsellors), also indicated that they also disseminate study skills to help learners with effective study methods so they can perform well academically. Study skills help learners to understand things better and improve on their chances of passing examinations.

Substance abuse prevention

Concerning substance abuse, which has become an issue of serious concern to most schools, a meagre 39% of school counsellors and 20% of learners, indicated that their schools had a substance abuse prevention programme, through which schools educate and warn learners about the dangers of drugs. This means that learners have access to information about drugs, their types

and the physiological as well as psychological harm to individuals abusing them. Prevention means early intervention, which entails providing environments that support adaptive behaviour and identifying signs of substance use in children and taking deliberate steps to resolve them. Substance abuse is rife amongst adolescents, especially those still attending school (Botvin *et al*, 1990).

Sex education and HIV/AIDS

According to 94% of counsellors and 40% of learners, their schools offer sex education. This can be considered problematic since young people are mostly sexually active and the rate of HIV and AIDS infection in this age group is steadily increasing (StatsSA, 2009). Sex education remains a controversial issue in several countries, especially with regard to the age at which children start receiving such education, the amount of detail that is revealed, and topics dealing with human sexual behaviour (e.g. safe sex practices, masturbation, premarital sex, and sexual ethics). Despite this, not offering it can be considered a glaring disservice since sex education is seen by most scientists as a vital public health strategy as it equips learners with information about sexual intercourse, sexually transmitted illnesses as well as the dangers of promiscuous behaviour. It is during adolescence when young people begin to experiment with their sexuality and are very likely to make some bad sexual choices. This means that it is pertinent and proper for schools to provide learners with age-appropriate information about sex. Sex education would help learners make responsible decisions and acquire the skills and confidence to delay sex until they are ready. Recent statistics (Human Science Research Council, 2009) show that the rate of teenage conception in South Africa is too high hence sex education would empower learners to act before it is too late. However, a meagre 50% of counsellors, mostly females (80%), indicated that their

schools offered on-site psychological intervention for learners infected with HIV and affected by AIDS. This is disconcerting due to the high HIV infection rate in the country, especially between the ages of 16 to 25 years. Learners and educators in this predicament need emotional support and through Psychological Services, that is guaranteed, unless the programme is not fully implemented. The mandate of enhancing learners' mental health and general well-being makes the provision of counselling services a necessity.

Suicide prevention

Whereas 27.2% of learners indicated that they have thought of killing themselves, only 78 % of counsellors and 56% of learners felt that schools had a suicide prevention programme to help learners who are vulnerable to an extent that the risk of committing suicide is not a remote possibility. Depression is a psychological condition which, according to Schlebusch (1990), is the main cause of suicide. Depression resulting from being bullied at school can also lead to bullycide (i.e. taking one's life due to the pain of being bullied). According to Sun and Hui (2007) the rate of suicide is high during adolescence and part of the explanation can be sought in the fact that adolescents have been exposed to greater stress while environmental supports have decreased, leaving the adolescent more vulnerable (Gouws *et al*, 2000). Hence, it is important for schools – through psychological Services – to buffer individuals from depression by developing intervention strategies for the promotion of mental health and prevention of suicide among adolescents. This is tantamount to risk reduction, which according to Meyers and Nastasi (1999, p. 767) refers to strategies that are designed for members of a subgroup from the general population that is identified as being at risk of developing a disorder. According to Schlebusch, (2005a), early recognition of risk factors are important for prevention of suicidal behaviour, as is

the need to develop appropriate, cost-effective therapeutic interventions and research, as well as policy priorities.

Inclusive education and learner support

Whereas school counsellors unanimously (100%) indicated that their schools offered Inclusive Education, a meagre 30% of learners indicated that their schools offered Inclusive Education, which caters for the needs of learners with (special) learning difficulties. This can be attributed to the fact that learners were not well informed about the subject whereas counsellors and educators knew about it. According to the Inclusive Education Policy document, learner support (i.e. remedial intervention) is meant to provide assistance to learners with learning problems. It is sensible that schools without an operational Psychological Services programme would consider some of the services as a luxury or inconsequential.

Problems in general

Many studies (Greene, 2008; Furlong & Morrison, 2000; Sun & Hui, 2007; Ruddell & Curwen, 2002; Botvin *et al*, 1990) have attested to the prevalence of increased rates of drug related problems, problems about sexuality (sexual orientation), violence (including rape), depression and the resultant suicide-ideation and posited that learners would benefit greatly if they had access to qualified professionals such as counsellors, psychologists, and social workers.

The *status quo* in most schools reveal that guidance and counselling is not offered in most of them and that is problematic since it forms the gist of any Psychological Services programme. It is difficult to conceive of Psychological Services without guidance and counselling. Also, school

counsellors are essential for the implementation of a programme of Psychological Services in schools. It is important to note that more services are needed to meet the increasingly complex demands of adolescent learners.

At the end of Part Four, participants were asked to make suggestions regarding improving School Psychological Services. Their responses are presented as follows:

Participants unanimously pointed out that there was a need for counsellors in schools, as shown below:

“Schools should have a full-time counsellor, not a ‘free-lancer’”;
“Learners need counsellors when they are experiencing problems”;
“Our school needs full-time school counsellors, without a teaching load”;
“Learners should have unlimited access to school counsellors for the whole day”

Participants are called for an improved status of guidance and counselling, thus:

“Guidance and Counselling should be offered in secondary schools”;
“Psychological Services should be taken as seriously as academic subjects”;
“Psychologists should work closely with schools to help those with serious issues”;
“There should be enough time for guidance”; and
“Our school should have an operational Guidance and Counselling services programme”

Participants, mainly learners, also indicated that they needed educators who know how to care and love unconditionally, thus:

“Teachers should motivate and show that they care”; and
“Teachers should respect learners despite their age”.

One issue raised by school counsellors, educators and learners was for parents to be actively involved in the education of their children. As one school counsellor put it, *“Parental involvement is a must for an effective Psychological Services programme”* (School Counsellor).

Participants also pointed out that there was a need for resources in their schools, as follows:

*“We need counselling services for learners with problems”
“Our programme needs proactive planning and improved networking with outside agencies”; and
“Our schools should have resources to implement Psychological Services”*

Psychological Services are meant to benefit learners by meeting their needs thereby promoting well-being. According to the constructivist ideology, as Slezak (2007) put it, individuals actively construct personal meaning from their own personal understanding and experiences. This presupposes the need for Psychological Services, to help them make informed choices.

Resources for delivery of School Psychological Services

The theme is also about getting a bird’s-eye view of the resources for the dissemination of school Psychological Services. Resources have implications on the quality of Psychological Services rendered as they impact on the quality of services delivered. Often an assumption is made that the better resourced a programme is the better its results. It is my contention that it is not always the case. According to Kitzrow (2009, p. 653), “in order to provide high quality mental health services, it is critical that counselling centres have the necessary resources to carry out their mission in an effective and ethical manner because it is ethically unwise and legally risky to attempt to carry out a treatment mission with inadequate resources”. Resources which are of utmost importance for the delivery of School Psychological Services are personnel (educators,

counsellors and peer counsellors), material or physical resources (e.g. space and time), financial resources as well as the policy initiatives which spells out the political will of those entrusted with carrying out the mandate of providing quality ‘education for all’. Data for this section was drawn from Part Five of the questionnaires and the interview schedule.

Educators’ professional training and development

Concerning personnel, one of the most important resources for the implementation of Psychological Services is the school counsellor. Whereas counsellors were unanimous (100%) that their schools had school counsellors for students and staff consultation, only 50% of learners indicated that their schools did not have school counsellors. Even though most (60%) of them were not qualified as school counsellors, educators think that being a Life Orientation educator automatically makes and guarantees them the role of school counsellor. Most school counsellors are ‘designated’ counsellors by virtue of being Life Orientation specialists or offered the service out of their own sense of care and responsibility. The lack of qualified counsellors might have a negative effect on the implementation of Psychological Services. This poses a huge challenge as it implies that learners would not access Psychological Services, such as guidance and counselling, career education, sex education and someone to talk to when experiencing problems. Talking to friends and teachers can help but counsellors are better equipped to handle even the most depressing issues. The situation is exacerbated by the fact that the Department of Education does not provide both pre-service training programmes for school counsellors. The pre-service and in-service training of personnel (counsellors) ensures the delivery of quality services, services which ideally learners should have unlimited access to. In-service training of counsellors would promote the professional development of counsellors for the effective

implementation of Psychological Services and make them more competent to respond to learners' needs. They would learn to do the right things in their setting thereby improving the capacity of schools to respond to the needs of learners (Darling-Hammond, Bullmaster & Cobb, 1995). It would enable them to draw from their work experience. Counsellors (83%) also indicated that their schools had access to or contracted to registered or qualified psychologists who would intervene when learners or educators have serious emotional problems, e.g., suicide ideation. Registered Psychologists should handle learners with serious emotional problems as 89% of learners and 78% of school counsellors indicated. This necessitates that Psychologists and School counsellors work collaboratively to promote learners' well-being. This does not come as a surprise since the current arrangement by the DoE is that Psychologists would be located at the District offices and would visit schools upon invitation by either school counsellors or principals, especially for emergency cases requiring immediate intervention. This arrangement poses serious logistical challenges.

Peer counsellors

According to 50% of counsellors and 56% of learners, their schools did not have peer counsellors. Peer counsellors are an important resource for learners because learners find it easier to deal with issues if they know that they are not alone and that someone their age knows and understand what they are going through. Also, peer counsellors allow Psychological Services to reach and serve more learners and are an important part of the equation but they seem to be a missing link in many schools.

Teacher-Support Team

Also, according to 50% of counsellors their Psychological Services programmes do not have teacher-support-teams (TST's), to assist counsellors with the identification and provision of assistance to learners. The TST is composed of a select group of educators passionate about learners who can act both as a resource and a sounding board for school counsellors. This can be attributed to the rationalisation of services and staff redeployment which necessitated the abolishment of Psychological Services, specifically guidance and counselling. According to only 48% of participants, parents participated in their schools' programmes and schools consulted them when deciding on what they were going to embark on. What it means is that basically schools operated as islands with very little influence from the communities they serviced. This has the potential to cause confusion because it can make children feel like strangers in their own communities.

Material resources include guidance and counselling services and curriculum contents as well as the Life Orientation curriculum. Kelly (1999) defines the curriculum as "all learning which is planned and guided by the school, whether it is carried out in groups or individually, inside or outside the school". According to a marginal 40% of learners, their schools offered guidance and counselling services and they have a prescribed curriculum which they follow. This differed from the sentiment shared by 88% of counsellors who indicated that guidance and counselling services were offered in their schools. Resulting from the state-enforced teacher-rationalisation programme and redeployment of the mid-1990s such services ceased to be offered in non-White schools (Maree & Ebersöhn, 2002). Strangely and confusingly, only 23.5% of schools (5 out of 17) had school counsellors remunerated either by the Department of Education or School

Governing Boards. This means that even though they are not paid for their services, some educators enjoy helping learners with problems, an altruistic deed on their part which must be commended.

Life Orientation curriculum

Learners and school counsellors unanimously (100%) indicated that Life Orientation was offered in their schools. Life Orientation is an important aspect of school psychological services and its curriculum (a material resource) tackles many issues which addresses the developmental needs of youth, namely, health promotion, social and personal development, physical development and movement, and orientation to the world of work. In a context where guidance and counselling services are no longer offered, Life Orientation, which – according to 100% of counsellors – would fill the void by dispensing with the much needed Life Skills education, which is cardinal to the Life Orientation curriculum. It is the backbone of a Life Orientation programme. For example, learning outcome one includes themes such as nutrition, violence, accident prevention, substance abuse, communicable diseases prevention, environmental health (Department of Education, 2002b).

Implemented in 2005 as part of the Further Education and Training Curriculum (FET) in schools, Life Orientation (LO) was introduced as a compulsory learning area from Grade 8 to 10 which would later cascade into Grades 11 and 12. Life Orientation was introduced by the Department of Education, according to the National Curriculum Statement (NCS) (2003: 9), “to equip learners to engage on personal, psychological, moral, spiritual, cultural, socio-economic and cultural levels, and to respond positively to the demands of the world, assume responsibilities

and make the most of opportunities presented to them. Life Orientation equips learners with knowledge, values, attitudes and skills that prepare learners to respond effectively to the challenges that confront them in life so they can play a meaningful role in society and the economy”. The Life Orientation curriculum has five focus areas which are meant to address the developmental needs of learners. They are: health promotion, social development, personal development, physical development and movement, orientation to the world of work (career education). Importantly, the skills that learners needed to be successful in their lives were disseminated through LO hence 77.8% of counsellors and 84% of learners felt that Life Orientation would benefit learners with problems. The following were given as reasons for their assertions:-

“Grades 11 and 12 are very demanding and as learners we need help”;
“Grade 11 and 12 learners suffer a lot emotionally”;
“It equips us with skills to deal with life's challenges”;
“It is never too late for proper guidance and advice”;
“It will provide learners with information about careers”;
“Many of us are stressed and eager to share our burdens”; and
“Many stress-related problems start at school”.

This resonates with one of the critical outcomes of the National Curriculum Statement (DoE, 2003, p. 2) according to which “learners are required to be able to identify and solve problems and make decisions using critical and creative thinking”. It is not clear how this can be achieved when Life Orientation sessions – unlike guidance and counselling – do not provide for one-to-one counselling sessions. LO would not afford learners a chance to talk about their problems because common-sense dictates that it would be difficult for learners to talk about their problems in public fora, or else their counterparts would ridicule them and label them weaklings. This means

that although Life Orientation is not a substitute for guidance and counselling, the two can be complementary.

Policies and their implementation

Concerning political resources (i.e. national education policies), 56% of learners and 100% of counsellors indicated that their schools had a policy on school violence and its prevention. This means that schools have regulations to ensure safe school environments. Such policies and regulations empower schools to take decisive actions to prevent bullying incidents – including cyber bullying – from recurring. Smith *et al.*, (2004, p. 548) sees “bullying as a systemic problem which implies that effective intervention must be directed at the entire school context rather than just at individual bullies and victims”. Also, according to 76% of counsellors, 68% of learners, their schools have a substance abuse prevention programme. Substance abuse is one serious problem in our schools and they (schools) have the resources to take action in this regard. The one policy which learners seem to know very little about is the Inclusive Education policy, which, as pointed out by fewer than 48% of participants, has been implemented in their schools.

The resources identified above are equally important for the implementation and effective delivery of a comprehensive Psychological Services programme. Hence, their scarcity would have serious implications on the delivery of Psychological Services. Evidently from the above discussion schools are still in dire need of resources for the effective delivery of Psychological Services.

5.2.4 Challenges or obstacles affecting the delivery of Psychological Services

This theme takes a critical look at a variety of factors which, from participants' perspective, have negative effects on the delivery of School Psychological Services. The theme is based on Part Seven of the questionnaires and the interview schedule. I identified challenges which participants had to either confirm or reject as impacting on their school programme. Challenges abound affecting the delivery of Psychological Services in high schools such as the school curricula, failure on the part of the school counsellors to attend to learners with problems (e.g. victims of abuse, depressed and traumatised individuals), inadequate personnel to attend to learners' problems, lack of parental involvement, failure on the part of the school to tackle certain issues like sexuality education, inability of learners' parents to tackle certain issues like sexuality education, and all other issues relating to socio-economic problems which directly and indirectly impact on learners' state of well-being. These challenges impact on the promotion of learners' mental health, their emotional well-being and academic performance.

Lack of school counsellors

According to 50% of learners and 100% of counsellors, their schools did not have fulltime school counsellors. Such a counsellor would focus on ensuring that learners access psychological support only, without engaging in teaching duties. Consequently, the main challenge, as 72% of learners and 76% counsellors indicated, is the fact that there is no guidance and counselling services in most schools, the result of government initiated rationalisation policies and the redeployment of resources. This impact on the service delivery as it means that learners with problems had no specialist support, neither were they able to access essential services. This

raises problems, as 100% counsellors, 93% of learners and 80% of students indicated that there were traumatised learners (e.g. victims of violent crimes and witnesses) in their schools. In addition, 80% of learners, and 94% of counsellors indicated that their schools did not offer psychological support to learners infected or affected by HIV and AIDS.

Also related to the fact that there are no school counsellors, learners experiencing social, emotional and academic problems have difficulty accessing psychological support, as 76% and 82% of learners and counsellors respectively indicated. Learners with health related concerns – according to 78% of counsellors and 60% of learners – are in the same predicament. Participants (72%) also indicated that learners are not aware of the services available in their schools. This implies that they were not informed about where to seek help or from whom when in trouble or when experiencing any emotional discomfort. This under-utilisation of services can be attributed to the fact that confidentiality is not respected by educators, ignorance or lack of awareness of available services.

Lack of relevant resources

Most schools did not have physical resources (e.g. office space) and material resources (e.g. libraries with books), as 80% of learners and 80% of student participants indicated. This is the case in most township schools. Concerning financial resources, 67% of counsellors and 80% of learners indicated that their schools did not have funds allocated specifically for Psychological Services. This lack of material and financial resources continues to pose a huge challenge on the effective implementation and delivery of Psychological services. For example, books were scarce as most schools do not even have a functional library. Most schools do not have finances

to implement a Psychological Services programme on their own without departmental help. Some of the schools are located in townships where less than half of the learner population can afford to pay fees. With adequate funding schools would be able employ the services of consultant psychologists, purchase tests, stationery, psychology books, as well as books on careers and Life Skills education. Lastly, the lack of pre-service and in-service training of school counsellors – as indicated by 100% of counsellors – means that counsellors are a scarce resource in most schools. The department-facilitated in-service training of counsellors would sustain educator development and ensure skills training. The lack of in-service training is the consequence of redeployment which was introduced in the 1990's because the Department of Education felt that the economic cost of maintaining full time counsellors who were not carrying a teaching load was unbearable.

Lack of career guidance

Prominent amongst all the challenges is the fact that according to 84% of learners and 90% of students, the programme does not provide learners with career information. This is a huge disservice since education, amongst other things, is about equipping learners with economic skills and helping them plan for their future adult roles. Career education prepares learners for their entry into the labour market, and also ensures that those experiencing uncertainty regarding the choice of career are provided with counselling. Although parents are the primary adult influence on career decisions, the responsibility for providing career education to learners, according to Gouws *et al.*, (2000, p. 129), belongs to the guidance teacher or Life Orientation teacher.

Implementation of inclusive education

Also, the programme as it is –according to 83% of counsellors and 80% of learners – does not accommodate or cater for learners with special needs. The fact is that Inclusive Education (IE) is in the process of being implemented. Given some time, the Department of Education would provide school resources to ensure full implementation in the so-called full service schools. These will be preceded by the conversion of special schools into resource centres which would provide an improved educational service to targeted learners and also provide specialised professional support in curriculum, assessment and instruction to designated full-service schools (Department of Education, 2001). But with the lack of psychological services in schools one wonders whether schools would “be prepared to undertake the changes that are necessary to create or develop a successful inclusive school programme” (McLeskey & Waldron, 2007, p. 166).

Table 5.4: Challenges impacting on the implementation of Psychological Services

QUESTIONNAIRE ITEM	SCHOOL COUNSELLORS	LEARNERS
	N=17	N=773
Ineffective implementation of Psychological Services	94%	96%
No qualified school counsellors	51%	94%
Inadequate provision of career guidance	65%	84%
No support for learners with academic problems	94%	82%
Lack of resources (including finances)	65%	80%
No support for learners with social/emotional problems	100%	82%
There are traumatised learners who need support	100%	93%
Lack of support for learners infected/affected by HIV and AIDS	94%	80%
Lack of guidance and counselling services	71%	76%
Confidentiality not being respected by educators	51%	75%
Learners are unaware of the available services	82%	72%
No substance abuse prevention policy	76%	72%
No school violence prevention policy	71%	68%
No in-service training of counsellors	100%	60%
Lack of parental involvement	76%	82%
Lack of departmental support to implement SPS	71%	60%
Educators not prepared to implement the FET curriculum	88%	40%
No support for learners with special needs	82%	80%

Implementation of Life Orientation

Of serious concern though is the fact that 88.8% of counsellors – who are educators themselves with many years' experience – felt that educators were not prepared to implement the new FET curriculum, which includes Life Orientation as a compulsory subject/learning area. If this is the *status quo*, how then does the DoE ensure that Life Orientation educators are competent to teach in the learning area? This fact alone poses a huge challenge with the implementation of the new curriculum since the fact that Life Orientation educators are not adequately trained to offer the learning area compromises the quality of the programme. When asked to name other challenges which in their view impacts on the delivery of Psychological Services, participants mentioned

the teacher-learner ratio, which according to DoE policy directive was supposed to be 1:32 but is much higher, and sometimes as high as 1:50 in some schools.

According to 94% of learners, their schools do not offer Life Skills education. This is attributable to the marginalisation of Life Orientation as a learning area and the fact that, like its predecessor guidance and counselling, it is not taken seriously. What is confusing about participants' response is that Life Orientation is offered in all schools nationally, and its curriculum revolves around Life Skills. Perhaps this is an indication or proof that Life Orientation is also being marginalised like its predecessor, Guidance and Counselling. Hence learners hold an informed opinion that Life Skills is not offered. However, the Life Orientation curriculum – with its five focus areas (namely, health promotion, social development, personal development, physical development and movement, orientation to the world of work) – is meant to equip learners with mental tools (Life Skills) which would provide a cushion against many challenges which characterises adolescence.

Lack of psychological support for learners

As indicated by learners (78%), social problems such as poverty and unemployment as well domestic violence were rife in their communities and they affect many learners. These issues combined have the propensity to spawn emotional instability and psychological problems. This means that schools have an important stabilising role to play. Participants, majority counsellors (78%) indicated that their schools do not have a policy on the prevention of substance abuse. Counsellors (72%) also indicated that their schools did not have a school violence prevention policy. There is a link between the abuse of drugs by learners and the high rate of violent

incidents in schools. The policies mentioned above would assist schools to develop a code of conduct and at the same time be able to take action when learners are culprits. Importantly, as 82% of learners indicated, lack of parental involvement is a challenge to most schools.

Participants identified various impediments which impacts on the implementation and delivery of Psychological Services. The following were some of the challenges identified by participants:

“Lack of properly organised Psychological Services in schools”
“The lack of qualified school counsellors”,
“Lack of guidance and counselling services”,
“Lack of both pre-service and in-service training of school counsellors”,
“Lack of counselling services for victims of trauma, violence and abuse”
“Failure by the National Department of Education to provide schools with the support they need to deliver Psychological Services programme”
“Educators not being adequately prepared to implement the new FET curriculum”
“The presence of educators and learners infected or affected by HIV and AIDS in need of school-based psychological support”
“Increasing rates of learner promiscuity and teenage pregnancy due to lack of sex education”
“Psychological services not being able to provide help and support to learners with social/emotional and academic problems”
“Inadequate parental support for educators and learners”
“Overcrowded classrooms and high teacher-learner ratio”; and
“Non-existent substance abuse prevention and school violence prevention.”

Participants - specifically counsellors - mentioned disciplinary problems as some of the challenges impacting on the delivery of Psychological Services. They mentioned substance abuse (including cigarette smoking), sexual harassment of girls, bunking or truancy, and school violence (bullying) as some of the most common problems, especially in township schools. With learners having to deal with such issues, it would be naïve to expect them to perform in contexts where these matters are not dealt with properly. Being adolescents, learners are highly sexually-active, take risks and think they are invincible (Tatar, 2001). They seldom consider themselves as vulnerable. Being vulnerable, impressionable, and easily overwhelmed by issues affecting

them, impacts on adolescents' development and their psychological well-being. Hence, they need counsellors who will be accessible at all times where intervention is sometimes a matter of life and death.

Social ills such as violence and crime, poverty and unemployment and behavioural problems such as bullying, substance abuse, peer pressure, teenage pregnancy, and domestic abuse continue to present a huge challenge to the youth. School Psychological Services should provide them with tools necessary to combat these societal concerns. Parents – due to economic demands – do not spend enough quality time with their children nurturing and guiding them. As a result, the void left by parents in their children's lives has to be filled by teachers and school counsellors. With all these challenges school counsellors will have work cut out for them if they take up the challenge. This is a mammoth task but one that could be accomplished through cooperation and networking of all participants who stands to benefit from these endeavours.

Although the participants (learners, school counsellors and educators) represented different sectors of society, the survey gleaned interesting and valuable information concerning their understandings of psychological services, learners' needs for psychological services, the current status of services, their impact on learners' wellbeing and academic performance as well as challenges, *vis-à-vis*, the state of Psychological Services in high schools.

5.3 Results of the Principals' sample

School principals were the last sample I interviewed with the intention of getting an unbiased view *vis-à-vis* School Psychological Services. Unlike school counsellors, I felt that principals had nothing to lose and would not paint a rosy picture to deceive me as to the prevailing status quo. Ten school principals were interviewed and the interviews lasted for approximately one hour. The interview schedule was composed on factual questions and opinion-related questions (c.f. *Appendix F*). Although the findings of this sample do not differ significantly from that of the other samples, their input provided more details and added a new dimension. The interesting and illuminating facts which emerged from the interviews with school principals will be discussed under the following subheadings:

5.3.1 Principals' views on adolescence

Principals gave different views on their understanding of adolescents, the common sentiments being their view of adolescents as children with a lot of issues, who consequently need adult intervention, including guidance and counselling. Most of the definitions principals provided revolved around chronology thus:

Adolescents are young people going through teenage years, their brains are not fully developed and they lack adequate understanding of a lot of issues such as respect, discipline and consequences for their actions. They are trying to find their way in the world and have to learn from role models unfortunately they are not always there (Principal C).

According to Waters et al., (2009), school staff must become ‘role models’ of expected behaviour. Some definitions of adolescence acknowledged the gravity or magnitude of the developmental stage as reflected by Principal A:

It is a troublesome age because the person's body is growing at a fast rate, in a way that controls the way they think and behave....They are just mixed and confused.

Yet, some responses were very optimistic as they depicted adolescents as young adults who are constantly in need of emotional support, thus:

Children going through their teenage years, and undergoing changes to become adults. They need adult guidance and intervention to develop properly (Principal D).

A common thread among the above definitions is the idea that children are developing and naturally there would be challenges along the way, challenges which makes adult intervention indispensable to make the journey through life less cumbersome and tumultuous.

5.3.2 Principals' definition of School Psychological Services

One issue considered the most pertinent in this study is the principals' conceptualisation of School Psychological Services. To some, this was a new concept because for decades in this country people only spoke of school guidance and counselling. When it was phased out and replaced by Life Orientation, they only spoke of psychological services when talking about the job done by psychologists. These were some of the definitions:

I would say it is the provision of help to students with a kind of emotional or psychological problems they are going through especially during the difficult period of growing up (Principal A).

Principal F provided a more succinct definition of psychological services thus:

My understanding is that SPS are services meant to support teaching and learning, assist in the understanding learners' behaviour as well as educators themselves; assist in the relations among learners and educators, and also assist learners handle socio-economic challenges they experience when growing up (Principal F).

Other definitions of SPS express a more general view of such as follows:

They are services that assist schools with understanding kids and their problems and nurturing them (Principal J);
It is assistance offered to learners to address the social and psychological issues affecting them (Principal G).

From the above definitions, it became apparent that principals have an idea as to what School Psychological Services entail, though some were uncertain as to what it is meant to accomplish or achieve amongst learners and educators. Importantly, principals see psychological services as a reservoir of supportive services which schools can draw from to address issues affecting learners daily. In a nutshell, principals share an opinion that School Psychological Services are meant to mitigate the effects of psycho-social issues affecting learners' well-being.

5.3.3 The need for School Psychological Services and their impact on learners' well-being and academic performance

Principals unanimously indicated that there was definitely a need for School Psychological Services (SPS) and did not think it was acceptable that some schools do not have access to such services. As Principal D stated, *“each and every school should have Psychological Services”*. Reasons thereof varied from simple superstition to complex social issues needing psychological interventions to untangle. These reasons given for their assertions varied as shown below:

Ya, there is a problem of substance abuse and bullying. I think that the bigger problems are dealing with kinds of situations prevailing at home. That is our biggest concern. The child does not just inherit the problem at school. It's usually a problem that is coming from home. It's children with divorced parents; single parents, children living with grandparents, no supervision, absentee mothers and fathers. It's just a whole lot of issues (Principal A).

The sentiments were echoed by Principal B who said that

There are a lot of kids from unstable homes, child-headed households. Quite a lot of our girls live with their grannies, mostly as a result of death in the family. This year alone we have had two families where there were fatal shootings, and, that is very traumatic. People are dying from AIDS and cancer, and we also have victims of parental divorce. And like every school we have a problem of substance abuse and teenage pregnancy. Many of our girls are from dysfunctional families and need coping skills to handle that.

It is apparent that there is a trend amongst principals of blaming parents for the disciplinary problems experienced at school, a source of disillusionment to many principals. As one principal shares his sentiment in this excerpt:

Particularly in our case, we have parents that are not listening to us. There is a lot of dysfunctional parenting. We also have learners to whom schooling is not an option. Poor parenting is impacting on the children and we are made to suffer the brunt of it. Parents are not providing boundaries to their kids. They do not know what is going on in their children's lives. They buy them cell phones but have no idea who their children are talking to (Principal C).

The solution, as Principal A pointed out is “to go to the root of the problem than deal with symptoms”, which means often educators focus on the learner’s misdemeanour than the context (e.g. the family) which produces the behaviour. Thus, psychologists and social workers must collaborate to address the issues of dysfunctional families and poor parenting.

Principal F, when asked if schools generally and his in particular needed psychological services responded thus:

Definitely, a big yes, no doubt about that. All schools, including mine, need psychological services. Yes, there is a dire need for psychological services in schools.

In order to justify his response he said that

There are challenges which are psychologically related such as satanic possessions and group hallucinations. You just find learners screaming, that's a psychological problem. Teachers just got stunned, and did not know what to do. There are learners from child-headed households, we have a number of such learners. They need to be supported. We have orphans here. They need to be supported psychologically. We have learners threatening suicide, who need psychological support. We have learners that have children, some are under age. We have learners that are being abused. All these learners need psychological support (Principal F).

Principal F also told a story that one learner committed suicide which prompted him to tell learners to consult him if they had problems, and consequently there was a stream of learners coming to his office. He said that he felt incompetent to handle most of the issues as he is not a psychologist, but was compelled to ‘do something’. Some of the chilling stories principals shared with me included a fatal shooting involving parents which a learner witnessed and was consequently orphaned; a prostitution ring involving male teachers and young girls with female teachers acting as pimps and a boy who refused to live with his father because he was being sodomised. In two schools there were on-going departmental investigations about allegations of rape (or sexual assault) of girls by male teachers. Both victims and perpetrators can, as principals pointed out, benefit from School Psychological Services (SPS), especially face-to-face counselling, which is something most schools are failing to provide.

Substance abuse, bullying and teenage pregnancy were some of the issues raised by principals as issues requiring psychological intervention. As one principal put it:

Substance abuse is a huge problem – especially whoonga. We were in the papers recently because members of the community policing forum (CPF) came to school and beat up learners with sjamboks for selling drugs. Teenage pregnancy is also a concern, last year we had 8 pregnancies, this year we have seven. We allow them to continue schooling until they are 7 months pregnant (Principal J).

Although there is a distinct and unambiguous need for psychological services, as principals indicated above, there seems to be a shared sentiment that such services can address all social ills besetting communities. They are generally looked upon as services which in many ways would counteract the negative impact of poverty, crime, unemployment, diseases, teenage pregnancy and the psychological problems they tend to generate or manifest. As Principal H put it, “*we try but there is definitely a need for trained professionals in the school, on a fulltime basis*”. If anything, this sounds more like a desperate plea for the return of such services in schools. This is echoed by Principal G who responded thus: “*Yes, even if it’s for half a day*”. Psychological services are generally conceptualised as services which in many ways would counteract the negative impact of unemployment, poverty, substance abuse, diseases, violence (including bullying), teenage pregnancy and the psychological problems they tend to generate. Essential services such as these cannot be improvised.

Principals unequivocally expressed a shared opinion that there is a definite link between psychological services and learners’ well-being and, as consequence, their academic performance. As Principal A pointed out:

I mean who is going to focus on something else, and in particular education, if something is worrying you? If you are hungry and starving and you are listening, you want food. If there is an emotional problem in your life and is troubling you, it does not matter how much education you are going to impart to this child, his mind is somewhere else. He will be saying 'I have got a bigger problem here', therefore we need somebody to take that problem out.

This means that if a learner is worried about an ill parent at home, domestic violence and abuse, this can be a distraction which sometimes makes learners act out violently. Thus the provision of psychological support can promote resilience, making the school 'a home away from home'.

According to Principal J *"a happy child is a performing child. If learners do not get support from home, they will not do well. Most of our learners' parents are our own drop-outs. That tells you something"*.

Some of the reasons given for the relationship between learners' well-being and their academic performance were:

Learners cannot focus if they have problems affecting their focus; a child who is feeling unsafe cannot focus on learning; problems affect learners' performance; things worrying learners affect their focus and performance; stable learners do well academically with assistance; learners with socio-economic challenges and victims of abuse won't perform well.

The overriding opinion shared by principals was that parental involvement is essential for maintaining learners' well-being and academic performance. When learners start feeling good about themselves, their self-esteem improves and this has a positive impact on their general

outlook on life and their scholastic performance. As Principal J succinctly summed it up above, if children are kept happy, they will perform beyond anybody's imagination.

5.3.4 The School Psychological Services status quo

After the national government phased out school guidance and counselling and replaced it with Life Orientation as part of the RNCS policy document, school counsellors, who were a prominent face of the programme gradually became rare and ultimately obsolete. This was the one thing that principals forthrightly lamented about. They were unanimous that the services currently provisioned were inadequate for a variety of reasons, as 70% of principals indicated, the main being the lack of trained personnel, especially counsellors. According to Principal A,

We do not have a fulltime school counsellor. Finance is the main issue. It's difficult to employ a counsellor. It is much better to have a teacher who can carry a teaching load and counsel learners at the same time.

The main barrier impacting on the delivery of services – according to principals – was the lack of trained counsellors and peer counsellors. This was due to the lack of funds as a challenge facing all Quintile 5 schools. Schools with adequate finances were able to employ counsellors as school governing body (SGB) paid employees. As pointed out by one principal, the delivery of quality psychological services go hand in hand with proper training of counsellors, something which the Department of Education should invest in. As Principal I posits, “*A school counsellor will assist learners with problems, assist with career guidance, help with teenage pregnancy, substance abuse and general learner behaviour*”

Yet, another principal indicated that their school, like most schools in the township, have resorted to using Life Orientation educators as counsellors, though they had no training in basic counselling skills. As Principal H succinctly put it, “*although our Life Orientation educator has no training, she handles learners’ problems very well. She does it out of compassion and from experience*”. Sometimes learners are referred to agencies (NGO’s) outside the school. These are issued in cases where educators feel that learners would receive expert services from trained professionals. The use of referrals to outside agencies or inviting specialists from outside, though as the last resort in most cases, is not an ideal situation as the development of a trusting relationship (i.e. rapport) between learners and counsellors is a *sine qua non* for comfortable and relaxed emotional interaction. This means that opening up to complete strangers poses a challenge to many learners who potentially could benefit immensely from psychological services.

As indicated earlier, former-Model C schools have managed to retain the services despite their being phased out. Principals of three schools (30%) maintain that their schools provide the services as they have trained counsellors. In most of these schools counsellors are employed and remunerated by the School Governing Bodies (SGB’s). The principal of one such school, when asked if his school provided adequate services, indicated thus: “*I think we do. We have counsellors who are very busy though we could do with one more or two. I think that we are still under-staffed*” (Principal C).

Also, some schools, despite having trained personnel, supplemented services by utilising locally trained peer counsellors. This, according to the principal, proved handy as many learners felt comfortable to share their concerns with their age-mates.

The Department of Education has centralised psychological services by locating them in the district offices. This means that psychologists will be situated at district offices and visit schools upon receiving a formal request. The main difficulty with district-based psychological services, as principals pointed out, was that they were not user-friendly. As Principal J lamented, *“There is a lot of paperwork involved before you can get them to visit the school and they take ages to respond. Sometimes it takes them a year to come to school, often when the situation has already been resolved”*

This means that by centralising services in District Offices the Department of Education (DoE) has not achieved to make services more accessible but, apart from the bureaucratic hurdles, manpower challenges continue to hamper the delivery of services in schools. A single psychologist cannot attend to the needs of 5000 learners and their educators. Hence, the paper work that accompanies the invitation of psychologists to visit schools is tedious or tiresome and discouraging for schools to even contemplate.

Concerning the CAPS policy, principals generally felt that the policy facilitates the provision of psychological services thus: *“The CAPS document is content-loaded and does not give educators enough time to interact with learners”*. Principal I indicated that *“it facilitates as it looks at the child in totality”*. Though they agreed that it facilitates the provision of psychological services,

Principals D and J expressed reservations thus: *“It gives educators more work as far as learners are concerned”* and *“It’s good on paper but implementation thereof is a different matter”*.

5.3.5 School-based issues needing psychological interventions

Principals were asked to identify issues that they felt needed psychological services to resolve. School-based mental health promotion and prevention programmes, such substance abuse and sexual violence were identified as a major need by principals. According to Principal D, *“there are so many learners with personal challenges and in need of emotional support”*. Some of the issues they identified were homosexuality, career guidance, domestic violence and abuse, broken homes and dysfunctional families, divorce, orphaned and vulnerable children, child-headed households and satanic possession. According to Principal C,

There are so many forces in play which makes the need for professional intervention a necessity, such as the link between stable homes and academic progress. Generally daily we deal with discipline problems. The abuse of drugs and bullying are some of the issues requiring specialist intervention. Though they are a lower priority to us as we have it under control, we are still very much vigilant.

In their view, psychological services could be used to address most of the issues, though one principal suggested a multi-pronged intervention strategy involving civic organisations and non-governmental organisations such as Love-Life and Life-Line.

Principal A argued that

“There are many learners with issues, the biggest being the fact that learners do not have an adult figure at home. A lot of children are brought up in single homes. I have been an

educator for thirty-two years and I found out that those that give us problems are from broken homes. There are too many divorces out there. We cannot keep on blaming the home. We must do something to make the child's life better" (Principal A).

Principal B said that *"We have learners with serious psychological problems, teenage pregnancy cases, like I said, we have girls attempting suicide, not that many but depressed learners that need somebody trained in that way. Trained professionals will know how to design intervention strategies"* (Principal B).

Principals also indicated that issues such as substance abuse, teenage sexuality and pregnancy, violence, including bullying and ill-discipline amongst learners were, to varying degrees, a concern in their schools, some minimally and others being a huge problem. According to some principals, there is a link between substance abuse and an escalation in violent incidents among learners, specifically bullying. This was a common feature in the lower grades where peer pressure was rife, driven by youngsters' need to impress.

One particular learner need identified by principals was the need for career information. Principal I indicated that *"we need career guidance, because that is where most learners are misled"*. One principal raised a concern about lazy learners thus:

Our learners need help with career choices. What I picked up is that learners have an extremely low work ethic. Learners are not motivated. I don't know if that is the responsibility of psychological services, to me it does. That is a matter of concern to us. And it's not only here, we go to other schools and we hear similar stories (Principal B).

Other needs mentioned were the need for emotional support such as guidance and counselling, the need for sex education (including teenage pregnancy), health education (including healthy lifestyles and HIV and AIDS), the need for drug awareness and mechanisms to prevent incidents of violence (such as rape and bullying) in schools. These issues are better handled by someone who is trained in this respect, with expertise to design suitable intervention strategies. Undoubtedly principals felt that the department of education should afford schools more support in this regard. Principals indicated that with social issues such as unemployment, poverty and domestic violence being so rampant, schools are very likely to feel the brunt and need programmes in place to deal with the manifestation of emotional problems. Like a concerned parent, Principal J, when asked if her school needed a dedicated school counsellor, stated, *“We need counsellors – problems, ooh! our kids are suffering. Some were raped and some are from child-headed households. Just last week a learner was raped on her way to school and I am attending a court case as I am talking to you”*

There is a need for personalised support and mentoring for both principals and educator, as this would minimise burnout. In this case, Principal F indicated that they had insufficient training in crisis response including counselling and sums up the desperation and hopelessness with the provision of psychological services thus:

It is time consuming to be dealing with psychological problems when we are supposed to be teaching. It also put some mental and physical strain on us because we are not trained to handle psychological problems. In a small way we are because we did educational psychology, but that is not our area of specialisation. Some of the matters, like the ones I have cited, are too intricate for us, so we need psychological support (Principal F).

Without experience or specific training it is not surprising that participants indicated low levels of confidence in psychological interventions. Dealing with the above issues, as principals recommended, would need School Psychological Services – under the stewardship of a qualified school counsellor or psychologist – to collaborate with other agencies that have a vested interest in community upliftment. However, School Psychological Services should still remain an important part of the equation, as something which learners have easy access to five days a week.

In order to address the issues mentioned above, principals identified services important for schools to provision, a *sine qua non* in a developmentally responsive school environment (Ellerbrock & Kiefer, 2013). The services identified were guidance and counselling, counselling - both group and individual - for learners experiencing serious emotional problems and trauma counselling, guidance – to equip learners with life skills, drug abuse awareness, career guidance and a school nutrition programme (previously called feeding scheme). When Principal F was asked what his school would need to deliver psychological services, his response was:

I would ask for a fulltime psychologist or counsellor. I would ask for structural support, like a room. I would also ask for a feeding scheme because some of the problems learners have relate to nutrition. We are a quintile 4 school and currently run our own feeding scheme, through which we are feeding about 100 learners every day.

Principals, as leaders of the management team, were generally very informed about initiatives or programmes that schools could implement to address issues affecting learners. Although they were faced with serious capacity challenges, as discussed below, the majority had contingency plans to circumvent negative psycho-social forces from destabilising the youth.

5.3.6 Challenges impacting on the provision of School Psychological Services

Similar to all other samples (namely school counsellors and learners), principals had to identify issues and factors which hampered the delivery of provisioning of psychological services. My expectation was that each school would demonstrate its uniqueness by prioritising a few prominent challenges affecting their schools.

Lack of DoE support: One of the biggest challenges impacting on the provision of psychological services is the apparent lack of support from the Department of Education as Principal A forthrightly stated:

I am not too sure what the policies are. There is a sub-directorate that deals with psychological services, but it's inadequate. They are overworked and do not seem to have enough time and they do not have too much personnel. So they need more people. So when we have any problems that we cannot deal with, we should refer them to their office. But I have never referred anyone to them.

Concurring with Principal A, Principal E says:

We need teacher training by the department to address barriers, but I do not know whether they have the facilities and the capacity. Our school does not have the services, unless if you are privileged. We do not even have money to run the school. We are a quintile 5 school with no resources, and get R32000-00 a year.

These two cases are an example of what leads to the development of 'learnt helplessness' amongst teachers, the feeling of being powerless in a situation, which unfortunately puts learners at a disadvantage.

Inaccessibility of the PGSES office: Another challenge facing schools is that even though there is an office in the district tasked with the mandate of delivering services to schools, it dismally fails to live up to expectations as apparent in the following quotes:

Principal G: *“The DoE is offering psychological services but it’s a lengthy process to have them coming to a school”*

Principal H: *“We make contact with the Department of Education but service delivery is another matter”*

Principal J: *“The Department of Education is not easy to use because of the paperwork involved and the time they take to respond. Sometimes it takes them a year to come to school, often when the situation has already been resolved”*

Humanpower challenges, particularly the lack of trained or qualified specialists, is another challenge hampering service delivery. Principal A was very vocal about the need for counsellors when he said:

I don’t think it’s just the CAPS. But when education was transformed in this country and they got rid of the most important person we use to call the guidance counsellor. That’s were things started going wrong, you know. Yes, the department may say that they have psychological services, how far that translate down to the school situation, where you need help at ground level, we don’t have that. You know, before CAPS came about, we had problems with psychological services.

When asked about the barriers in the provision of psychological services and what was needed to address them, Principal A said: *“I think the DoE must come into play and provide properly trained psychologists for each school. If not the school, but to start they can cluster a few schools together, you know, initially and say this five schools should work together”*. It seems as

if the suggestion to cluster schools is the most feasible in the prevailing scenario of serious manpower shortage.

As Principal J pointed out:

We need counsellors – problems, oh, our kids are suffering. Some were raped and some are from child-headed households. Just last week a learner was raped on her way to school and I am attending a court case.

Principal B indicated that there was a need for counsellors in school and put this as her reason for her assertion:

We have learners with serious psychological problems, teenage pregnancy cases, like I said, we have had girls attempting suicide, not that many but depressed learners that need somebody trained in that way. Trained professionals will know how to design intervention strategies.

Whilst Principal C mooted that his school could do with one more counsellor or two, Principal F said that his school had learners in need of emotional support and, as educators their hands were full as they were not psychologists. In order to circumvent the total collapse of psychological services, schools need services of counsellors who would have the competence attend to learners' developmental needs and challenges.

One of the challenges identified by principals as impacting on psychological services is the lack of clear policy directives. With the introduction of EDWP6, some psychologists presumed that there would be a policy focusing on the provision of psychological services. According to

Principal F, *“Yah there is a policy even though I might not have it. But we have officials from the department offering services in schools. If we need support, we invite them to come to the school. For example, now that we are heading towards the final exams, they would come to find out if there are any problems”*. Principals are aware of the Employee Assistance Programme (EAP) or Employee Wellness Programme (EWP) but have no idea if staff members know it and how they can benefit from it. Two principals indicated that they have referred their colleagues to EAP, one with a substance abuse-related problem, and the other was depressed due to some domestic issues. As for the CAPS policy, Principal B and Principal F felt that it facilitates the provision of psychological services as it relates to the Life Orientation curriculum and makes teachers understand the curriculum-related challenges and how to address them. However, Principal C, offers a contrasting view when he said that *“In my opinion I do not think it has any effect on psychological services, as I understand it, it’s just a revamp of the academic programmes”*.

The LO curriculum: Principals expressed differing views on the extent to which the LO curriculum addresses the question of the school psychological services. Though they indicated that the topics it covers entail different aspects of what SPS is about, e.g., substance abuse; bullying; career guidance; teenage pregnancy etc., most expressed reservations about capacity thus:

“I know that we have very capable educators out there offering LO, it’s difficult if one did not major in the subject. People think that anybody can teach LO, which is wrong” (Principal J).

A contrasting sentiment was expressed by Principal I who said:

“The LO curriculum is good enough, I mean most learners do well in LO though it is not considered when one applies to tertiary institutions. The rating LO gets from the DoE creates a negative attitude towards the subject”

Lack of parental support: Though the lack of parental support does not seem to be a serious and widespread concern, one principal indicated that it was, in this excerpt:

Particularly in our case, we have parents that are not listening to us. There is a lot of dysfunctional parenting. ...We called a meeting with a parent because her son has been absent from school and is in matric. His grades are bad and his mother is forcing him to write. She is a single mother. We know that he is not going to pass (Principal C).

It is common for parents to be in denial, especially in cases where children show clear manifestations of learning difficulties. Collaboration between schools and homes/parents is essential to address issues such as school violence and bullying, substance abuse and learners' behavioural problems.

Scarcity of resources including finances: Most principals indicated that the biggest challenge impacting on the delivery of psychological services in schools is the scarcity of resources, especially finances. As Principal A said in the following excerpt, *“Finance is one of the issues. Other issues are the provision of resources and manpower. To employ a counsellor is expensive. It's better to have a teacher who can carry a teaching load and counsel learners at the same time”*. Expressing similar sentiments, Principal J is quoted saying *“We need DoE funding to operate both the implementation of psychological services and feeding schemes. We are a quintile 5 school”*.

5.4 Conclusion

The study has managed to shed some light on the state of Psychological Services in high schools and changes that could be implemented to improve the *status quo*. Findings from the three samples consistently raised similar issues and what participants felt could be done to ameliorate the situation. Through a programme of Psychological Services schools can address most, if not all, of these issues. Nevertheless, there is a relationship or link between the availability of Psychological Services, learners' well-being and their scholastic performance. At the same time, it would be presumptuous and an oversight to suggest that School Psychological Services are the only tool that could be used to address all of the challenges discussed above. Educational psychologists and school counsellors will be seen as small actors in a vast system that is simply not getting things right in many communities. Clearly – as confirmed by three unique data sources – Psychological Services do have an important role to play in education, a *sine qua non* in the promotion of learners' mental health.

Chapter Six presents the analysis and discussion of the findings.

CHAPTER SIX

DISCUSSION OF FINDINGS

“It is a demographic given that if we don’t do something new, it is going to get worse. The education system is the only system left that seems to function in a way that we can get a handle on it” [Hodgkinson, H. (1987), cited in Daley, T.T., 1988]

6.1 Introduction

This chapter is concerned with the discussion of findings as presented in chapter five. In this chapter I have attempted to explain how data collected during exploratory research provide answers to the research questions. Implications of this study are made against the backdrop of the challenges that educators and learners encounter concerning the provision of School Psychological Services, contextualised by an emerging democracy and a developing economy. Undoubtedly learners are negotiating challenges daily and some of the challenges are overwhelming to the limited resources that most of them have at their disposal. Schools are the spaces where they spend most of their formative years in and consequently should equip learners with skills to tackle life’s challenges without flinching or fail. Also, it will be opportune to find out if there is any consistency in the results of the three samples, including the pilot study.

6.2 Purpose of Study

The aim of the study is to investigate participants’ experiences and perceptions of the effectiveness of Psychological Services in high schools, whether or not they are benefiting their

intended target, in this case adolescent learners. Utilizing generated data, the research attempted to respond to the main research questions through its sub-questions:

- a) What are participants' (viz., learners, school counsellors, educators and principals) understandings of Psychological Services and their impact on learners' well-being and academic performance?
- b) What are learners' needs for School Psychological Services as identified by participants (viz., learners, school counsellors, educators and principals)?
- c) What is the current status of Psychological Services (including the various forms of School Psychological Services and resources) in the selected secondary schools?
- d) What are the challenges or obstacles to the effective implementation of Psychological Services in the selected schools?

6.3 Analysis of findings

This is a mixed methods multisite exploratory study, underpinned by the interpretivist paradigm, which is informed by a concern to understand the world as it is, and the fundamental nature of the social world at the level of subjective experience (Naicker, 2000). The findings of the study, *vis-à-vis*, participants' experiences of School Psychological Services, would be discussed hereunder. Although generated through surveys which have methodological weaknesses, the results are tantalizing in that they suggest that learners, educators, school counsellors and principals hold different views regarding their experiences of SPS and services offered. School principals were interviewed as a follow-up sample to evoke or elicit their sentiments on the issue.

The following is my interpretation of how data generated provided answers to the research questions:

6.3.1 What are participants' understandings of School Psychological Services (SPS) and their impact on learners' well-being and academic performance?

This theme focuses on two things, namely, participants' understandings of School Psychological Services and the relationship between SPS and learners' wellbeing and academic performance.

6.3.1.1 Participants' understandings of School Psychological Services

The majority of participants demonstrated some basic understandings of psychological services, though some conceptualised of SPS as another name for Guidance and Counselling. They also had a good idea as to what psychological services are meant to achieve and how learners benefit from them. Generally, participants understood psychological services as services meant for learners with issues and problems affecting their psychological well-being. Participants indicated that such services are vital for promoting learners' well-being, and that schools should be seen as sites where learners would have unlimited access to such services when they need them. These are some of the responses:

They are services for learners with serious psychological problems; Services by qualified school counsellors or psychologists to help learners; Services which learners can have easy access to in order to perform well academically; The provision of help to students with a kind of emotional or psychological problems they are going through when growing up; It is assistance offered to learners to address the social and psychological issues affecting them.

Regarding their description of psychological services, participants conceptualised them as constituted by guidance and counselling and Life Orientation; services by a qualified school

counsellor or psychologist to help learners with serious psychological problems; services meant to promote learners' well-being, and services to make learners better equipped to handle life's challenges. School principals and counsellors whose schools had access to psychological services were more positive about the services, especially counselling, the need for psychologists to give quick and concrete advice or be able to eliminate learning difficulties and behavioural problems, teach classes to gain a better understanding about problematic learners in the classroom and counsel teachers on their personal problems (Mägi & Kikas, 2009).

Participants descriptions of School Psychological Services correspond with the definition of psychological services as services for the protection and promotion of mental health and facilitation of learning (Elliot & Witt, 1986), which encompass prevention and pre-referral interventions for mild problems, high visibility for high-frequency problems, and strategies to address severe and pervasive problems (Texas Guide to School Health Programs, 2007), and inferred the relationship between emotions and education (Schutz & Lanehart, 2002). The above descriptions serve as preconditions to an affective school in which learners' emotions are acknowledged and handled in an open dialogue (Lang, 1999), thereby promoting the holistic development of learners. This makes the school to feel like a home away from home. Learners need to feel like they are part of the school, and that the school supports their academic pursuits, and that adults in the school care about their learning as well as about them as individuals (Waters *et al.*, 2009). Gregory and Cornell (2009, p. 109) define school support as “efforts to establish positive student-teacher relationship, help students with non-academic problems, and offer programmatic resources for students”. Adolescents will be able to handle the demands of

life if they are adequately equipped with Life Skills (Olivier *et al*, 1997), which must be part of the school curriculum and enjoy a high priority.

According to the Texas Guide to School Health Programmes (2007, p. 271), “the healthy emotional and social development – including a sense of self-worth – is critical to the success of children within and outside of the classroom”. The DoDea Manual (2946.4, 2001, p. 2) states that the purpose of Psychological Services is to promote mental and physical wellness and facilitate learning of students by increasing their capacity to overcome academic, personal, and social problems that could hinder their attainment of educational success and a satisfying and productive life. If that is the case, it is difficult to conceive of a teaching and learning environment without such services. What will happen when learners presents with an ‘emotional baggage’ which distracts them from focusing on their studies? One of the main components of a school Psychological Services programme consists of Guidance and Counselling programme which consists of four important components, namely, guidance curriculum, responsive services, individual planning, and systems support. The guidance curriculum provides guidance content in a systematic way to all students, responsive services address the immediate needs or concerns of students, individual planning is about assisting students in monitoring and understanding their own development, and system support includes programme and staff activities and services. Life Skills education is a crucial element of Psychological Services and must always be included in the education of young people. Life Skills, some of which are “education designed to contribute to the promotion of personal and social development, the prevention of health and social problems, and the protection of human rights” (Muthukrishna, 2002, p. 82), and “abilities for

adaptive and positive behaviour that equip people to deal effectively with the demands and challenges of everyday life” (WHO, 1997, p. 1).

This means that life skills plays an important role in helping learners define their identities (life roles) including self-concepts and career identities, how they think or feel about themselves, their emotions regarding their identities and how to express them, and how that influences their actions. Conceptualised thus, life skills can influence every facet of learners’ lives. It influences self-efficacy (motivation, optimism and perseverance) and direct behaviours, make individuals act rather than merely react (proactivity) (Ebersöhn, 2002). This means that life skills influence learners’ self-concepts (thinking aspect of self) and self-esteem (the affective or emotional aspect of self). According to Huitt (2009, p. 1), “people who have a good self-esteem have a clearly differentiated self-concept. When people know themselves they can maximise outcomes because they know what they can and cannot do”.

Studies on school violence (Furlong & Morrison, 2000; Greene, 2008), teenage suicide ideation (Sun & Hui, 2007; Ruddell & Curwen, 2002; Bostik & Everall, 2007), substance abuse (Botvin *et al*, 1990; O’Connor & Britton, 2007) and emotional problems (Kauffman, 1997), point to the importance of Psychological Services in equipping learners with Life Skills training and providing behavioural interventions, including short-term and crisis counselling services, for individuals and groups to address these issues. Impoverished and hostile environments such as these tend to increase the prevalence of stress-related psychological symptoms and higher rates of behavioural and anti-social disorders. Undoubtedly, this shows that through Psychological Services schools have the capability to impact positively on learners’ well-being.

6.3.1.2 Participants' understandings of the relationship between School Psychological Services and learners' well-being and academic performance

According to participants (i.e. school counsellors, learners and principals), there is a relationship between learners' psychological well-being and their academic performance. Participants conceptualised of the relationship thus:

Learners have serious academic and emotional problems; Having problems affect learners' focus and negatively affect their performance; Emotionally distressed or traumatised learners cannot concentrate and learn to their full potential; Happy learners are better motivated to perform well academically.

Research confirms what common sense tells us, that is, physical and mental health affects school readiness and academic achievement. This means that the provision of Psychological Services influences learners' psychological well-being or mental health. This is in accordance with Strein *et al.*, (2003)'s assertion that mental health services are increasingly recognized as both prerequisites of and contributors to student learning, although, conversely, poor academic achievement may be a frequent cause or contributor to mental health problems. According to the Centre for Disease Control (2009), academic performance is used broadly to describe different factors that may influence student success in school, namely, cognitive skills and attitudes (e.g. attention, memory, motivation, self-concept), academic behaviours (e.g. organization, planning, attendance) and academic achievement (e.g. standardized test scores). Notwithstanding their resilience, learners with problems are very unlikely to achieve their full potential academically. This means that learners who enjoy unlimited access to Psychological Services perform well academically than those who do not. Obviously, learners living in crime-infested areas are

constantly worried about their safety and that affects their well-being and performance. Confirming this, Principal J said “*I can’t imagine a child who feels unsafe focusing on learning and absorbing anything at all*”. Lockhat and Van Niekerk (2000) maintain that with the majority of children living in impoverished and effectively hostile environments, they exhibit a high prevalence of stress-related psychological symptoms, difficulties in cognitive development, lower levels of academic achievement, and higher rates of behavioural and anti-social disorders. Likewise, hungry learners would battle to maintain their focus and perform well.

Thuneberg’s (2007) assertion that school achievement is related to basic needs fulfilment and self-regulation is proof of the importance of school counsellors and the provision of services to satisfy learners’ needs in schools. This is consistent with White (2004, p. 17)’s assertion that “a school that provides a stable and structured environment and warm nurturing educators will see better academic and social achievement by those learners”. Through Psychological Services learners are encouraged to explore, get more concrete and mental material to investigate, more achievements to be proud of, a greater sense of competence – and through that even more interest to go on (Thuneberg, 2007). He describes happiness as a consequence of environmental and subjective factors’ interaction, and that it is the consequence of the fulfilment of basic psychological needs. School psychological services facilitate needs fulfilment.

According to Quinn and Duckworth (2005, p. 5), “psychological well-being and academic performance are mutually reinforcing; children who perform well academically do so because they are happy and performing well academically makes them more contented”. This demonstrates a close relationship between learners’ psychological well-being and their academic

performance. Voitkane, Miežite, Rascevska and Vanags (2006, p. 56) succinctly confirm this line of thought when they say that “students with a high level of perceived social support have higher level of self-esteem and assertiveness, which indicates their potential for self-actualisation”. Social support could mean support from counsellors, educators, parents and friends – all of whom could have a positive influence on learners’ mental health state. As Van Petegem *et al.*, (2008) put it, although well-being and achievement are separate output factors independent of each other, schools can be effective in both cognitive and affective levels. Terjesen *et al.*, (2004, p. 165) maintain that contentment causes greater cognitive changes by “calling forth the urge to savour the present moment and integrate those momentary experiences into an enriched appreciation of one’s place in the world.” This might increase learners’ optimism and overall motivation to pursue additional positive experiences, possibly in previously avoided arenas. DeRoma *et al.*, (2009) refer to it as self-efficacy, students’ beliefs about their own performance capabilities within academic domains.

Concerning the relationship between School Psychological Services and learners’ academic performance, Brigman and Campbell (2003), investigating the impact of school counsellors on learners’ academic performance, identified three clusters of skills critical to school success, namely, (1) cognitive and meta cognitive skills such as goal setting, progress monitoring, and memory skills; (2) social skills such as interpersonal skills, social problem solving, listening, and teamwork skills; and (3) self-management skills such as managing attention, motivation, and anger. These three skill sets are – in Brigman and Campbell’s (2003) opinion – the most powerful predictors of long-term school success and seemed to separate high achievers from low achievers. If counsellors’ interventions impacted on learners’ behaviour relating to cognitive,

social, and self-management skills, there would be an improvement in learners' academic performance. Group interventions are considered as the most efficient way of promoting psychological health and for early interventions when children display signs of emotional difficulties. Psychological Services can be seen as stimuli which influence learners' behaviour which indirectly impacts on their academic performance.

However, the lack of Psychological Services, according to school counsellors, exacerbates the prevalence of depression amongst learners which in turn influences academic performance. As Schutz and DeCuir (2002, p. 132) put it, "emotions are an integral part of the educational activity setting, and it is important to understand the nature of emotions in the school context". Corroborating this, DeRoma, Leach and Leverett's (2009) findings reveal "a significant, negative relationship between depression and academic performance". A disconcerting or worrisome fact, as Henn (2005) asserts, is that the rates of depression and suicide ideation amongst adolescents are increasing at an alarming rate and mostly involve family variables. Fathi-Ashiani, Ejei, Khodapanahi and Tarkhorani (2007, p. 997) maintain that "there is a significant relationship between academic achievement and anxiety, and associates high degrees of academic achievement with low anxiety". Obviously, depression impairs learners' ability to succeed academically, and symptoms of depression related to motivation, concentration, ineffective problem-solving and low self-efficacy contributes to an impaired academic functioning. According to Finn (2010, p. 1) "stress is the most frequently cited psychological factor adversely affecting the academic performance of students", whilst DeRoma *et al.*, (2009) unequivocally assert that "academic problems (e.g. grades) are the most frequent cause of depression and that students who have a pessimistic view of themselves because of depression are very likely to be

threatened by difficult academic tasks, thus negatively affecting their academic potential”. Undoubtedly, learners’ feelings about school have academic and behavioural outcomes since it influences how much they learn (Hallinah, 2009). DeRoma *et al.*, (2009), suggest the need for the development of effective counselling interventions that concentrate on enhancing psychological adjustment in order to improve academic performance. As the Departments of Health and Education (2012, p. 26) put it, “various biological, social, psychological factors are known to contribute toward the high prevalence of mental disorders among young people, whilst poor mental health is associated with, amongst other things, educational underachievement, social disadvantage and poor health and well-being. The mental health needs of children and adolescents can be addressed on numerous levels and intervention sites, but schools can play an important role”. They are sites where children and adolescents with mental health problems should receive help.

According to Lethoko *et al.*, (2001, p. 312), “the learning environment is negatively affected by students’ lack of motivation, their ability to concentrate in class, non-supportive homes, little parental care and involvement, fewer resources in the home, little intellectual stimulation, and illiterate parents”. This means that the presence of a school counsellor is a major source of comfort for learners, especially those with pressing emotional issues. It is common knowledge that learners that are free of problems and emotionally sound-minded are very likely to do well academically than those that are troubled, unhappy and/or experiencing emotional turmoil.

It is common knowledge that when learners are not content in any situation, their results will show. Learners with fewer problems are capable of performing to their best potential than those

with more serious issues. As Naicker (2000, p. 4) put it, “learning programmes should facilitate the creation of opportunities for all learners, including those who are disabled in some way or other way, to strive toward the attainment of similar learning outcomes”. This means that a learner with a pressing personal problem cannot perform to his or her optimum potential, resulting in the loss of opportunities. Also, crime is one serious concern facing our new democracy and is endemic in our communities. This tends to diffuse into our schools – a microcosm of society – to the detriment of learners’ psychological well-being. When learners are preoccupied with their own safety, it affects their concentration and they consequently under-perform. Hopelessness breeds depression and sometimes suicide ideation, a recipe for disaster. Through School Psychological Services, as this study suggests, school counsellors can restore hope and resurrect learners’ self-esteem.

6.3.2 What are secondary school learners’ needs for Psychological Services as identified by participants of this study?

The theme discusses participants’ understandings of adolescence and their views on adolescent learners’ needs for Psychological Services. Table 5.2 provides a summary of learners’ needs as identified by participants, viz. learners and school counsellors.

6.3.2.1 Participants’ definitions of adolescence

Apart from identifying behavioural repertoire typical or characteristic of adolescence, participants were asked to identify their needs for psychological services. The perceptions of adolescence are determined by individuals’ frames of reference and their experiences of

adolescents in their cultural and social settings. Adolescence is generally viewed as a time of substantial emotional and developmental growth which can usher in serious and overwhelming psychological difficulties (Hassiotis & Turk, 2012). Despite this, there are developmental tendencies that adolescents have in common. Participants generally described adolescence as

A developmentally challenging time for all young people; the time during which individuals begin to develop an adult identity, the capacity for intimate relationships and adult role responsibilities, a phase full of problems and developmental challenges; children who need more adult intervention than others.

As shown in these descriptions, adolescence is considered an important developmental period for youth as they prepare for post-secondary experiences and, at the same time, high school affords them an opportunity to develop their areas of interest and develop social roles as they establish new relationships with peers and adults within a broader social network (Kalberg et al., 2011). As Principal D put it, they are “*children going through their teenage years and undergoing changes to become adults. They need adult guidance and intervention to develop properly*” According to Mashile (2000, p. 105) schools accommodate individuals with unique intellectual, personal and social needs which often educators are incompetent to deal with, hence there is a huge need for support services. Schools have to meet the academic, behavioural, and social needs of an increasingly diverse student body. Gregory and Cornell (2009, p. 111) posit that “adolescents have developmental needs for both sufficient structure and support to feel safe, albeit in a balanced and moderated form that still permits them a degree of independence and autonomy that reflects their emerging sense of adult identity”. According to Crespi and Hughes (2004) in recent years the number of adolescents with problems has increased steadily and must be assisted through school-based early prevention and intervention programmes. Unfortunately, the large numbers of children with emotional and/or behavioural problems do not receive

adequate, comprehensive services in the mental health systems. It is common during this phase of development for learners to grapple with issues such as personal identity (including body image), relationships (intimate and non-intimate), substance abuse, violence and crime (including bullying and rape), depression, suicide, health issues and commercial responsibilities. While most adolescents successfully accomplish these tasks and become self-sufficient members of society, for some, adolescent developmental tasks could lead them to increased mental health problems (Shin, 2005). Whilst it cannot be denied that adolescence is a difficult phase, as most participants, especially counsellors and principals, indicated, most contemporary researchers are justifiably calling for an altered perspective on adolescence and not to label them as rebels who are in conflict with their parents, whose lives are fraught with great tension, disruption and impulsive action (Gouws *et al.*, 2000), are emotionally disturbed (Schutz & Lanehart, 2002), and “at risk of failing to fulfil their physical and mental promise” (Adelman & Taylor, 1998, p. 135). This means that schools have a huge challenge of meeting the academic, behavioural, and social needs of an increasingly diverse student body, who without proper support may suffer from behavioural and psychological problems. As Van Dyk (2008) put it, all children have physical, emotional, social, spiritual and intellectual needs that must be met so they can enjoy life, and without psychosocial support to fulfil their needs they may suffer long-term social and emotional impairment. According to Hilliard (1991), if an adolescent has been in a strong secure family atmosphere, where two parents are present, their chances of surviving adolescence without a crisis (alcohol, drugs, pregnancy) are better than it is for someone from a less secure background. Ellerbrock and Kiefer (2013, p. 191) maintain that “there is a need for schools to continue to listen to students’ voices in order for educators and school environments to be responsive to their needs”.

6.3.2.2 Participants' understandings of learners' needs for psychological services

According to **Table 5.2**, participants revealed a myriad of learners' needs, which school counsellors and educators must be cognizant of, which – amongst other things – are: learners' need for life skills (including problem-solving skills); their need for career guidance – to help learners make informed career choices; the need for counselling services – for learners with problems; learners' need for study skills – to help learners improve their academic performance; the need for skills to cope with stress, anxiety and traumatic experiences; the need for sex education; the need for information including information about drugs; learners' need for skills to handle peer pressure; learners' need for self-concept and self-esteem enhancement, and their need for relationship and interpersonal skills. Principal F's sentiments capture the essence of learners' needs thus:

There are challenges which are psychologically related such as satanic possessions and group hallucinations. You just find learners screaming, that's a psychological problem. Teachers just got stunned, and did not know what to do. There are learners from child-headed households, we have a number of such learners. They need to be supported. We have orphans here. They need to be supported psychologically. We have learners threatening suicide, who need psychological support. We have learners that have children, some are under age. We have learners that are being abused. All these learners need psychological support (Principal F).

Adolescents are in crisis in school, home and community (Crespi & Hughes, 2004) and are evidently struggling with developmental challenges as indicated by occurrences of school violence, suicide, behavioural problems, emotional hardships and teen issues (Lam & Hui, 2010), hence, a relatively high percentage of youth in schools experience mental health problems (Perfect & Morris, 2011). O'Hanlon, Patterson and Parham (2007) posit that mental health problems potentially can interfere with a person's thoughts, feelings and social behaviour,

and although less severe, they can develop into mental illnesses if not treated effectively. Below is a discussion of some of the reasons why they need psychological services, including prevention and early intervention approaches:

6.3.2.2.1 Learners' need for life skills

Participants indicated that learners need life skills education, which involves the provision of information services. This includes information about relationships and dating, issues around sexuality and engaging in sexual activity, peer pressure, and so forth. As Swartz, *et al.*, (2011) put it, information is invaluable to all learners, is empowering and affords young people control over their differing circumstances. Information is a basic ingredient in the decision-making process, lest learners' ability to make informed choices would be compromised. As Lunenburg (2010) put it, information service is designed to provide accurate and current information in order that the students may make intelligent choices of an educational programme, an occupation, or a social activity. According to Maree and Ebersöhn (2002), life skills contribute to the promotion of personal and social development, the prevention of health and social problems, and the protection of human rights. According to Theron and Dalzell (2006), it is important for schools to educate and empower the adolescent to moderate the risk factors associated with and experienced during adolescence. Adolescents in general, are often impulsive in decision-making, behaviour and emotional outbursts. The adolescent should be equipped with life skills that will empower him/her to lead a meaningful life despite the stress and challenges endemic to this period of transition. Renk (2005a, p. 62) indicates that, "children with difficulties are likely to continue having problems throughout their childhood and into adulthood, hence the need for early psychological intervention".

Early intervention can have two meanings, namely, interventions early in the course of life or interventions that occur early in the pathway when signs and symptoms of a mental health or social health problem begins to show (O’Hanlon *et al.*, 2007). Life skills education is more of the former, which entails multidisciplinary services provided to learners to promote health and well-being, enhance emerging competencies, minimise developmental delays, remediate existing or emerging disabilities and promote overall functioning (*ibid*). It is very pertinent in the context of Inclusive Education (White Paper 6) that learners do not experience barriers to learning, including emotional and psychological barriers (DoE, 2001). Problems experienced by learners can be impediments to learning, which must be resolved as soon as they are identified. Barriers to learning are conceptualised as factors which prevented learners from accessing educational provision (DoE, 2003). Life Skills is an effective vehicle to equip adolescents with skills needed to reduce the risks associated with challenges of adolescence. As Rooth (2005, p. 78) puts it “given the needs of adolescents for guidance and their importance in the future of the country, it is short-sighted – to put it mildly – not to give school guidance the pivotal role it should have”. Lunenburg (2010, p. 1) concedes that “guidance is an integral part of education as it helps learners make intelligent choices, which, like other abilities, is not innate but must be developed”.

Van Niekerk and Prins (2001) maintain that South Africa as a developing country has an enormous need for Psychological Services due to the political changes as well as the social trauma that the country has been through in recent times. Attributing the high drop-out rate at tertiary institutions to the lack of guidance and counselling, KwaZulu-Natal academics urged the provincial Department of Education to reconsider introducing guidance and counselling in

predominantly African areas to prepare learners for the daunting challenges of tertiary education (Makhanya, Mercury, May 21, 2002). Senzo Mchunu, the MEC for education in KwaZulu-Natal, expressing his concern over the threat posed by social ills in education said “it is disheartening to see the number of school girls who fall pregnant and the number of learners who get involved in unbecoming behaviour as a result of substance abuse. We can no longer fold our arms and lament when these social ills continue to ravage the future of our children. The sobering truth is that these challenges are real; we need to work together with parents, teachers, and the community to steer our children in the right direction” (Masuku, *Sowetan*, April 29, 2011, p. 7).

6.3.2.2.2 Learners’ need for psychological services (including guidance and counselling services)

In order to address the learners’ needs presented above, participants unequivocally pointed out that there was a need for Psychological Services (also referred to as support services) in schools with qualified counsellors at the helm, who they can consult in times of need. This, according to Kazdin (1993, p. 127), is mainly due to the fact that “an alarming number of adolescents engage in activities (e.g. unprotected sex, alcohol use) and are exposed to conditions (e.g. abuse, violence) that place them at risk for adverse mental and physical health consequences”. According to Kikas (2003), school psychologists aim to help pupils perform better in school and life – to be more successful in school and have better relationships with peers and adults. The school counsellor plays a role of promoting and fostering the mental health and welfare of learners. The growing awareness of how learners’ mental health and behavioural problems, such as bullying, affect learning is increasing demand for school counsellors and school psychologists to offer counselling and other mental health services. As the Texas Guide to School Health

Programs (2007, p. 272) put it, “school counsellors and psychologists are uniquely positioned to prepare learners to meet the demands of the world, have specialised training in both psychology and education, and can support social, emotional and academic learning goals of all students, and provide services that impacts on learning. School counsellors can make significant contributions to the learning and healthy development of children and adolescents, especially in school districts that fully recognize the value of their services”. School counsellors and LO educators, as ‘front-line’ mental health workers interact more closely with everyday social issues at schools and provide support to learners with problems, thereby demonstrating the ‘will to care’. Currently, according to Anthun (1999), there is mismatch of needed and provided services to schools, with too much time being spent on assessment and report-writing at the cost of consultative problem-solving, prevention and intervention. In the same tone, Lomofsky and Lazarus (2001) posit that all learners should have the opportunity to benefit from the education system. This means that support services should be allocated to those in need, with priority being given to marginalised youth, ‘learners with special needs’, those affected by violence and those to whom a quality education has previously been denied.

Participants (viz. learners, counsellors and principals) indicated that there were learners experiencing serious academic, social and emotional problems which affect their well-being and learning and only qualified school counsellors or psychologists would know how to design intervention strategies to help them. Working through the pain (the result of counselling and psychotherapy) is an important part of the healing process for the victims of trauma. Trauma is an event that is outside the range of usual human experience which is markedly distressing to almost anyone (Evans & Swartz, 2000). Evidently, young people value having a school

counsellor who will afford them an opportunity of being listened to, so they can confide in him/her and get things off their chest. Marneweck *et al.*, (2008) maintains that vulnerable children infected or affected by HIV and AIDS need guidance, assistance and treatment, and school-wide interventions must include the provision of psycho-social support in the form of counselling for learners. According to Tatar and Amram (2008, p. 67) “there is an urgent need to equip both school counsellors and teachers with the appropriate knowledge, skills and techniques that will allow them to act professionally concerning students’ psychological and educational needs”. A bird’s eye-view of data presents a scenario of an increased number of learners with serious emotional problems who need help and emotional support, and most of whom can overcome adversity through counselling. As McLaughlin (1999) states, counselling has an important role to play in enhancing both learning and effective schooling, and the counsellor’s job is to help a learner find more effective ways of using what he has already got in terms of aptitude, ability and personal in a truly satisfying way. “Counselling assists students define, and accomplish personal, academic, and career goals by providing developmental, preventive, and remedial counselling” (Kitzrow, 2009). It has to be seen as a necessary part of the work of a school, and at the same time, it should be emphasized that the acquisition of counselling skills demands training. This means that even designated teachers who were not trained and offered the service out of their own sense of care and responsibility would need some form of psycho-social training, otherwise, learners should be referred to professional counsellors. It is important for Psychological services – specifically counselling and psychotherapy – to foster learners’ emotional growth (Pillay, 2012; Mbuyazi, 2002; Maluwa-Banda, 1998). This means that teacher training programmes must include basic lay counselling as an integral component of training so teachers can deal with the trauma that learners face, including issues of grief and bereavement,

and as Mannah (2002) posits, AIDS orphans are most in need of this kind of counselling. Pillay (2012) maintains that LO teachers need to have thorough knowledge about the current social problems that learners are facing, namely, emotional, physical and sexual abuse, substance abuse, poverty, and HIV/AIDS, and be equipped with the necessary skills to provide learners with counselling support. The counselling context presents a natural safe space for personal exploration, and the counselling relationship permits an open and honest discussion about sensitive issues.

6.3.2.2.3 Learners' need for career guidance

Participants mooted the need for schools to provide career guidance, which would help learners with career information and decision-making skills and empower them to make informed career choices. This emphasizes experiences that facilitate a person's career development and preparation for the world of work. It is alarming that a number of learners (84%) do not perceive any real career guidance occurring in their schools. Geldenhuys and de Lange (2007) say that a major challenge in identity development during adolescence is the development and acquisition of career identity, which entails the possession of clear and stable picture of one's goals, interests and talents. The Organisation for Economic Co-operation and Development (OECD) (2004, p. 10) defines career guidance as "services and activities intended to assist individuals, of any age and at any point throughout their lives, to make educational, training, and occupational choices and to manage their careers". Educators in Mbuyazi's (1999) study rated career guidance as their most important tasks, followed by raising learners' self-concept. According Bojuwoye and Mbanjwa (2006, p. 5), "realistic career-choice is possible in the light of adequate self-knowledge, career knowledge and knowledge of environment; and that these various forms of

knowledge can be facilitated by carefully planned career education curriculum and counselling services”. Career decision-making and career choice is best made based on sufficient and relevant information so learners can make informed choices (Watson & Nqweni, 1999; Donald *et al.*, 2000). Thus career counselling is also about information: self-information about the individual who must make a decision and career information about the options the individual has to consider. This means that learners’ need for information and assistance regarding career options is paramount. However, as OECD (2004, p. 41) cautions “career information should be designed as a learning tool rather than simply a way to provide basic education”. According to Hurley and Thorp (2002), the lack of career guidance leads to high school graduates who are either undecided as to what career to pursue, or who may make a poorly informed decision that they may regret or abandon altogether.

Gibson and Mitchell (2003) says that career development, career education and career counselling are interrelated as one without the other is ineffective and meaningless. The distinction, however, is that career education stimulates career development, and career counselling provides direction for career development or education. Hence, a school programme should not provision career guidance without career counselling. The shortcoming with career education, according to OECD (2004, p. 12), is that “those who provide career education and guidance in schools often lack specialised training” and the number of people employed to provide the services in schools is often not enough to meet student need and demand. However, as participants pointed out, there are gaps in the provision of information which impact negatively on learners’ capacity to make realistic career choices. It is important that Life

Orientation educators are properly trained and well informed about careers. According to Julien (1999), guidance counsellors can assist as information services providers.

Adolescents' development is stimulated and shaped for three great experiences of life: learning, living with others, and working (Bojuwoye & Mbanjwa, 2006). Although educators lack training in career education, some do their best to provide learners with career information. Tertiary pre-service and in-service training programmes for school counsellors and educators can address this short-coming. In-service training, which begins after an individual begins work responsibilities, is meant to help him/her develop competencies or skills in a specific discipline or occupation. The benefit is that trainees can draw from their experience, and the disadvantage is that since the trainee is already responsible for and engaged in a task, he or she may be distracted from teaching or counselling. Hence, Geldenhuys and de Lange (2007) suggest that schools need thoroughly trained career-guidance educators, especially previously disadvantaged schools. A good SPS programme, as Akhurst and Mkhize (2006) put it, would help students acquire personal information and through counselling assist learners to make appropriate career decisions.

6.3.2.2.4 Learners' needs for sex education

According to participants (viz. learners, school counsellors and principals), learners need sex education. Adeyemo and Williams (2009) avers that adolescence is a time of sexual experimentation which can result in devastating health consequences. One explanation is their desire to develop an adult identity and attaining autonomy, the other, sexual activity is seen as a platform for navigating future roles, career, marriage and family life. Adolescents are sexually

active and they can only manage their impulses through appropriate information. As Gillis (1996) puts it, with young people attempting to achieve an acceptable balance between modern day societal standards and their own sexual requirements, the need for sexual education has never been greater. Good sex education is an important part of a well-balanced education, something that is wanted and valued by the majority of young people and their parents (Vincent, 2007). In support, Blake (2008) maintains that learning about sex is a core part of school life. This is due to the fact that the median age of first sexual intercourse is 16 for both young men and young women. Ideally, according to Gillis (1996) and Turnbull (2012), all children should receive basic sex education from their parents or caregivers from an early age, which involves continuing, informal discussions, giving frank and factual answers to the spontaneous questions young people tend to ask. They need to understand the impact of sexually transmitted diseases, be aware of the dangers of sexual promiscuity and factors causing teenage pregnancies. Learners highlighted the need for more information on how to access health-related services and HIV support services. According to Macleod and Tracey (2010, p. 29) “the average age of sexual debut has increased from around 14 years to around 18 years, indicating that education is making some difference by reducing vulnerability to risky sexual behaviour”. Participants unanimously agreed that certain topics are particularly difficult to discuss with parents, for example, sex and relationships. This is consistent with the findings of Fox and Butler (2007, p. 108) about “the difficulty of talking to parents especially about things that they may not approve of”. According to Turnbull (2012), close and connected family relationships allow for a trusting relationship to develop and for sexual matters to be discussed openly. However, in many African families sex is still regarded as a taboo topic, an invasion of privacy, an embarrassing subject and something that is never spoken about with one’s parents. As Vincent (2007) put it, sex education has long

been associated with controversy and discomfort, and an arena within which myths and conflicting beliefs abound. Conservative and liberal debates are still pervasive, with one side arguing that sex education makes children more inquisitive and encourages promiscuity, and the other side arguing that it is a solution to such problems. Nevertheless, School Psychological Services would ensure that learners get information that is complete, accurate and reflects their family's values. They will gain the skills to handle peer pressure, such as assertiveness skills, and hopefully delay sex until they are emotionally ready to face the consequences.

As Witmer (2010, p.1) put it, “comprehensive sexuality education programme should start in kindergarten and continue through high school. It brings up age-appropriate sexuality topics and covers the broad spectrum of sex education, including safe sex, STD's, body image, masturbation, contraceptives, teenage pregnancy and more”. If teenagers are receiving this type of information at school there will be times when parents need to buffer some of the information as it may have come sooner than your child needed it. Sciarra (2004), on the other hand, suggests that a comprehensive programme should encourage abstinence or the delay of sexual activity and provide concrete information about contraception, but it must focus on Life Skills such as building learners' self-esteem, honing decision-making skills, assertiveness training, and helping students envision a future in which they are successful and self-sufficient. Sex education is about teaching children decision-making skills, assertiveness skills and having the confidence to interact with their peers. According to Darroch and Singh (1999), the best strategy for continued decline in teenage pregnancy levels is a multifaceted approach, which involves programmes and policies aimed at encouraging learners to postpone intercourse. Education and information should prepare learners to adequately prevent pregnancy and sexually transmitted infections.

According to Prega Govender (*Sunday Times*, August 22, 2010, p.7) in a recent newspaper article, learners as young as 12 are having unprotected sex, some of them with multiple partners. As Joan van Niekerk (*ibid*) observed, there is a lot of pressure on girls to become sexually active and most felt powerless to insist on contraception. Peer pressure, drug and alcohol abuse can lead to early sexual experimentation, often with disastrous effects. According to Sathiparsad and Taylor (2011), sexual experimentation is a normal part of adolescent development.

A comprehensive Life Skills programme which includes assertiveness training would empower learners to handle matters such as these. Although, according to the HSRC (2009), there is no magic bullet for teenage pregnancy, and given the multiple levels of influence on adolescent sexual behaviour, school-based sex education will provide young people with information and skills required for them to make informed choices. This can involve a comprehensive approach that addresses abstinence and safe sex practices and engaging peer educators (HSRC, 2009). Sathiparsad and Taylor (2011), on the other hand, recommend that lessons on gender positioning, relationships, sexuality and reproductive health should be covered in earlier grades, before the likely commencement of sexual activity. The department has developed a policy called '*Managing Learner Pregnancy in Public Schools*' that provides step-by-step guidelines on how schools should support pregnant learners and ensure that they complete their schooling.

6.3.2.2.5 Learners' need for relationship skills

As participants of this study indicated, learners also need help with interpersonal and relationship skills. Adolescence being a tumultuous phase necessitates some training on how to initiate emotional bonds and sustain them in both romantic and non-romantic relationships. They need to

learn the skills to make the relationship bonds stronger, and the ability to build and maintain trust. This is more so for children of divorcing or divorced parents who, apart from losing trust in significant others, need acceptance, safety, structure and stable homes. Theron and Dalzell (2006) state that inadequate and unstable social relationships increase the adolescent's vulnerability to inappropriate attitudes and behaviours. They also increase adolescents' vulnerability to depression, which is the main cause of suicide among teenagers. Supporting the assertion, Robertson and Simons (1989, p. 135) posit that "perceived parental rejection is a potent cause of depressive symptoms among young people. Rejecting parents (i.e. parents who engage in excessive blaming, criticizing, shaming etc.) produce children with a predisposition to blame themselves for negative events". According to Bostik and Everall (2007, p. 80) "the numerous links between adolescent suicidality and various conceptualisations of social support confirms the need for greater understanding of interpersonal relationships. Isolation, loneliness and lack of support from family and peers have repeatedly been found to increase risk for suicidal ideation and attempts". In order to address this, Henn (2005) recommends that teachers act as 'gate-keepers' in identifying adolescents with problems and signs of potential suicide and making appropriate referrals. Bostik and Everall (2007, p. 80) found that "the quality of attachment in adolescence plays an important role in healthy psychological, social and emotional functioning". Attachment is defined as "an enduring bond established between a child and a caregiver in the early years of life that profoundly affects every component of the human condition" (Bostik & Everall, 2007, p. 80). It is thus fitting that anger management skills, conflict resolution skills and the ability to communicate one's feelings are important relationship skills which schools should equip learners with.

6.3.2.2.6 Learners' need skills to handle peer pressure

Participants (learners, educators, school counsellors and principals) indicated that learners need skills to handle peer pressure. According to Gouws *et al.*, (2000), during adolescence the need for close friends becomes crucial. It is common for adolescents to want to conform to peers' influences, sometimes to their own detriment. Brofenbrenner (Gouws *et al.*, 2000) assert that adolescents turn to their age-mates less by choice than by default from the vacuum left by the withdrawal of parents and adults. Their lives are filled with undesirable substitutes of a ruling peer group. Patrick, (1997) says that the quality of children's relationships with peers appears to have a strong influence on their emotional and motivational response to school. Peer influences have been found to be among the strongest predictors of drug use and early teenage sexual experiences during adolescence, meaning that one of the most important reasons for teenage drug usage and promiscuous behaviour is peer pressure. Hence, it is incumbent on the schools to equip learners – through Life Skills education – with assertiveness skills, empower them to stand their ground and avoid temptation.

Assertiveness skills would help adolescents deal with the problem of substance abuse, which, according to Gillis (1996), is escalating at an alarming rate. Swartz *et al.*, (2011) identify family dysfunction and peer pressure as the two interpersonal factors which increase learners' vulnerability to substance abuse. One of the many reasons why young people take drugs is a desire for acceptance by their peer groups (Gillis, 1996; Dunu, 2003). Learners with a low self-esteem, victims of abuse and bullying, those resentful and angry, traumatised and depressed are highly predisposed to substance abuse. Early intervention by parents and counsellors who care enough to talk to them about the inherent dangers of drug and alcohol abuse is highly

recommended for children. To ensure a greater level of competence of teachers to apply prevention and intervention strategies, universities and colleges should offer a module on school bullying and violence as part of the initial teacher education (O'Moore, 2005, p. 7). This is due to the fact that children emerge from violent experiences with a predilection for violence themselves (Lockhat & Van Niekerk, 2000). Hence, the need for early intervention programmes in schools to address these issues. Meyers and Nastasi (1999) define early intervention as those methods that are designed to prevent the development of more serious problems after beginning signs of the disorder appears. These procedures are often implemented through early screening and the use of prompt effective treatment with population showing early signs of the disorder. Dunu (2003) calls early intervention as "the talk", which is based on the slogan that 'information is power'. According to O'Hanlon et al., (2007) intervening early in the life course has the greatest potential to prevent or significantly ameliorate some of the health and wellbeing problems seen in adult life. Through the 'talk' learners will be equipped with problem-solving skills which would help them deal with these issues. This is in line with Landrum, Tankersley and Kauffman's (2003, p. 152) assertion that "interventions most acceptable to educators and accordingly most likely to be implemented with integrity, are (a) easy to implement, (b) not time-intensive, (c) positive, (d) perceived to be effective by the educator, and e) compatible with the context in which they the intervention will be employed". Importantly, the most direct way of improving outcomes in childhood and thus influencing the life course is to ensure that the learning environments are consistently nourishing, stimulating, and meet the health and developmental needs of learners (O'Hanlon et al., 2007).

6.3.2.2.7 Learners need skills to cope with anxiety, depression and psychological trauma

According to participants, learners need help to address their stress, anxiety and trauma levels.

A study by Peter Gray (2010, p. 1) points to “the steady increase in the rates of depression and anxiety among young people for the past fifty years. Anxiety correlates significantly with people’s sense of control over their own lives. People who believe that they are in charge of their own fate are less likely to become anxious or depressed than are those who believe that they are victims of circumstances beyond their control”. According to Schlebusch (2005b) South African studies have indicated a high incidence of depression in suicidal children, an issue of serious concern. Today’s adolescents are increasingly exposed to physical violence, political violence and war and racial tension which can lead to extreme stress and emotional problems (Furlong & Morrison, 2000). With many learners experiencing problems, witnessing or being victims of acts of violence in their schools and communities, it is very likely that most of them would be depressed and traumatised. Evans and Swartz (2000, p. 51) define a traumatic event as an “event that is outside the range of usual human experience which is markedly distressing to almost anyone. Rates of violence in South Africa are staggeringly high, and consequently, South Africans from all walks of life are commonly confronted with violence, and the rate and range of trauma experienced increases with increasing economic disadvantage. These disproportionately high rates of violence impose extra demands on schools with significant impediments such as insufficient staff and limited resources”. Mncube and Harber (2013) mention loss of self-esteem, shame, anxiety, truancy, concentration problems, stress serious psychological problems and even suicide as consequences of bullying. According to Batsche and Knoff (1994), although the impact of bullying on academic performance is less well understood, it would be logical to assume that the effects of skipping school, avoiding school-related activities and fear for one’s

safety would be detrimental to academic progress. Hence, bullying prevention should be a community endeavour.

According to Gouws *et al.*, (2000), excessive stress is harmful and negatively influences the adolescent's health and overall development. The adolescent's academic performance may suffer, leading to underachievement, concentration problems, absenteeism, disinterest in class and homework, and lowered student satisfaction and self-esteem. When asked to respond about high levels of teacher absenteeism, Maluleke said that stress and depression were the main culprits, products of high workloads which included administrative tasks. "Teachers have to do police work, maternity work and social work. So they are highly demotivated and stressed" (*Sunday Times*, November 3, 2013, p. 10). Affirming the sentiment, Gray (2010) maintains that anxiety and depression correlate significantly with people's sense of control or lack of control over their own lives. People who believe that they are in charge of their own fate are less likely to become anxious or depressed than are those who believe that they are victims of circumstances beyond their control. Gray (2010) blames this on our systems of constant testing and evaluation which substitutes extrinsic rewards and goals for intrinsic ones, and is almost designed to produce anxiety and depression. Herman *et al.*, (2004) attributes that to faulty or maladaptive cognitions, which tend to cause learned helplessness, creating a cyclical pattern of emotional distress and academic failure. Locally, one can add the crime rate as one of the factors which causes an increase in anxiety and depression among learners and educators. As Robertson and Simons (1989, p. 135) point out, "life has little purpose if one's self lacks value or merit and consequently morale and motivation dissipates quickly in the face of perceptions of meaninglessness and purposelessness". Diminished self-esteem is accompanied by increased

feelings of unhappiness, fatigue, and withdrawal. Depression may make adolescents vulnerable to other problems such as scholastic problems, interpersonal and social problems, and they may even contemplate and attempt suicide (Gouws *et al.*, 2000). According to Gilligan (1998), school can offer vulnerable children asylum from a barren, neglectful or abusive home environment, a refugee from a disordered household. Sadly, trauma, psychotherapy and counselling services are not rendered in South African schools.

The rates of depression increase dramatically from childhood to adolescence, especially among females. Sigelman and Rider (2006) posited that children become more vulnerable to depression as they enter adolescence which leads to suicidal thoughts and suicide attempts. According to Sigelman and Rider (2006, p. 476), “suicide is the third leading cause of death for this age group, far behind accidental injuries and just behind homicides”. Often a suicide attempt has been characterised as a ‘cry for help’ – a desperate effort to get others to notice and help resolve problems that have become unbearable. The availability of Psychological Services has the potential to reduce incidents of depression and suicide amongst learners. Corroborating this, Sun and Hui (2007) asserted that having a caring and supportive school system, with close teacher-student and student-student relationships, is vitally important in fostering adolescent psychological health. Students who reported more positive relationships with their significant others exhibited higher levels of psychological well-being. This means that adolescents would be better adjusted if they are surrounded by multiple support systems. Affirming the statement, Bostik and Everall (2007) says that providing connection through a relationship which conveys genuine acceptance, understanding and tolerance serves as a powerful intervention. This suggests that feelings of connectedness and closeness that result from supportive contact with friends,

family or helping professional could have a healing effect on suicidality and preventing future suicide risk.

An ecological analysis of depression, according to Herman *et al.*, (2004), is needed to create multi-tiered school-based prevention programming that will effectively reduce the depression epidemic. In an effort to curb its prevalence, Herman *et al.*, (2004) recommends that teachers, parents and counsellors understand adolescent depression, its causes and risk reduction strategies that can be implemented to support learners. They should also identify and refer children who may need support and services. As DeRoma *et al.*, (2009, p. 4) put it, “with increased problem-solving ability students may experience greater self-efficacy with managing both academic and emotional stressors which can cause depression”. Emotional support such as counselling is a must for individuals experiencing serious or life-threatening emotional problems and depression, and “the school as a site for intervention can and must play an active role in promoting the social and emotional health of children” (Strogilos *et al.*, 2011, p. 809). According to Herman *et al.*, (2004, p. 767), “schools are legally mandated to identify and provide special education and related services to children experiencing a general pervasive mood of unhappiness or depression that interferes with their educational performance”.

6.3.2.2.8 Learners’ need for study skills

Learners need study skills which would make them improve their academic performance. In its current form, the Life Orientation curriculum does not offer the service and this unfortunately is not likely to change soon. According to Kizlik (2011, p. 1), “no two people study the same way, and there is little doubt that what works for one person may not work for another. However,

there are some general techniques that seem to produce good results. A learner's success in high school and college is dependent on his/her ability to study effectively and efficiently. The results of poor study skills are wasted time, frustration, and low or failing grades". Study skills would make learners better achievers and as Kizlik (2011, p. 1) puts it, "practice doesn't make perfect; perfect practice makes perfect." School Psychological Services must provide this service to learners in order to prevent psychological disturbances such as stress and depression resulting from failure, and help learners prepare for tests and exams without experiencing too much anxiety.

According to the findings of this study learners also need information and guidance around issues such as HIV and AIDS awareness; sexual harassment; child abuse; Human Rights; writing a CV; decision-making; problem-solving; stress management; healthy lifestyle, relationships and dating, racism etc. One way to help adolescents is by providing them with accurate and up-to-date information, which should include facts on smoking, drugs, teenage pregnancy, AIDS and other health issues (Hilliard, 1991). Information is the basic ingredient in the decision-making process, so learners can make 'informed' choices in life. Life Orientation lays the foundation though it becomes inadequate for individuals dealing with serious choices and need of expert advice.

As Bogden (2003, p. 11) put it, "school systems are not responsible for meeting every need of their students. But when the need directly affects learning, the school must meet the challenge". Social constructivism emphasizes the need to listen to learners' voices in order for educators, counsellors and school environments to be responsive to their needs (Clarke & Jenner, 2006).

Through a programme of Psychological Services, learners' needs which affect their well-being and learning can adequately be satisfied.

6.3.3 What is the current status of Psychological Services (Guidance and Counselling) in the selected secondary schools?

Participants' perceptions and/or experiences of the nature of the psychological services currently offered in their schools and the impact thereof on learners' well-being is what this theme is about. Table 5.3 (p. 190) provides a summary of participants' sentiments. According to Ellerbrock and Kiefer (2013), concerted and coordinated efforts are needed to provide students with sustained support – including psychological support – as they move from one school environment to the next. However, based on the data generated from participants (Cf. Table 5.3), Psychological Services are seemingly in a state of disarray, especially guidance and counselling. Where such services are offered, they are uncoordinated and without leadership of a qualified professional. Other than Life Orientation, guidance and counselling is not offered in many schools, and in the few schools that provide the services, they are inadequate. A few schools – mostly ex-Model C schools – offer guidance and counselling, a product of staff rationalisation and redeployment processes which came into effect in 1990. This means that schools which had services had them redirected to other sectors where the Department of Education felt they were needed, making guidance teachers' expertise redundant.

6.3.3.1 Life Orientation curriculum

According to participants, the one type of Psychological Services offered in almost all schools is Life Orientation (LO). Life Orientation, a new invention was introduced as one of the eight learning areas in Curriculum 2005 (C2005) and the in the Revised National Curriculum Statement (RNCS) and is currently offered in all schools and grades nationally. Life Orientation was introduced in 1997 as part of the National Curriculum Statement which was implemented as Curriculum 2005 (C2005). It evolved from the recommendations of the Committee of Heads of Educations which proposed a curriculum for guidance and the recommendations of the National Education Policy Investigation of 1992. According to Rooth (2005), Life Orientation came into being as a product of the collaboration between the Department of Health and the Department of Education aimed at the development of health promoting schools which would focus on Life Skills and HIV and AIDS education programmes. The Department of Education had phased out guidance and counselling and had to have something in place to replace it with, something more relevant to the needs of learners.

Life Orientation is offered in both public and private schools to – among other things – “equip learners with skills to solve problems, make informed morally responsible and accountable decisions and choices, and take appropriate actions to enable them to live meaningfully and successfully in a rapidly-changing society” (Department of Education, 2003: 9), the majority of participants felt that it would help learners with social, academic and emotional problems though it does not make provision for one-to-one counselling. This is corroborated by Theron and Dalzell’s (2006, p. 397) assertion that “the adolescent should be equipped with life skills that will empower him/her to lead a meaningful life, despite the stress and challenges endemic to this

period of transition”. The sentiment is affirmed by Van Deventer (2009, p. 129) when he points out that “in the 21st century learners are faced with needs and challenges that offer both problems and possibilities and LO can address many of the situations they encounter”. This is consistent with Rooth’s (2005) assertion that Life Orientation educators need psychological support as it deals with affective dimensions of the self – feelings and emotions – and educators often have to deal with learners sharing their traumas and problems and in need of support in coping with that. Hence, Life Orientation educators need thorough training in the learning area. However, the fact that Life Orientation does not provide for person-to-person interactions limits – but does not nullify – its effectiveness in helping learners with problems. Learners experience problems daily and are in constant need for emotional support from a qualified school counsellor. This is consistent with Perfect and Morris (2011)’s findings that as high as 20% of adolescents experience significant mental health difficulties which have a potential impact on school-related problems. They recommended that schools provide emotionally disturbed learners with mental health services, which includes guidance, counselling and psychotherapy – important aspects of School Psychological Services. Unfortunately, as the United Nations Refugee Agency (2010) posit, mental health care is not given first priority in the overburdened South African health care system, and as consequence, trauma and counselling services are rendered by a network of non-governmental organisations.

It is within the ambit of Life Orientation to develop learners as members of the community, with emphasis on self-in-society. Life Orientation addresses the need for learners to be integral to ‘shaping of a new society’ (Department of Education, 2000). Life Skills are an integral feature of the Life Orientation curriculum. Hence, the Department of Education (1995a) maintains that

guidance should equip learners with Life Skills to promote self-actualization, emotional stability and social sensitivity, and render the learner competent to make successful career choices, to build a stable family and to live with respect and tolerance for self and others. According to the United Nations (Rooth, 2005, p. 97), “Life Skills strengthen young people’s confidence and ability to deal with peer pressure, negotiating for abstinence or safer sex, managing conflict, and developing responsible relationships. Equipping young people with both knowledge and Life Skills is recognised as one of the most effective approaches to HIV prevention”. According to Kader Asmal – the former Minister of Education – education is the social vaccine to HIV and AIDS, (Asmal, 2002b; Ministry of Education, 2002c; Rodney, 2007), an assertion which suggests that education is an invaluable tool for reducing youths’ risk-taking behaviour and their vulnerability to HIV infection.

As for other types of psychological services, they are either infused into the Life Orientation curriculum or presented as standalone projects. Services such as health education, citizenship education, career education, sexuality education, and substance abuse prevention are part of the Life Orientation curriculum. An example of a standalone psychological service is inclusive education which is currently in the process of being implemented. The Life Orientation curriculum includes five learning outcomes, namely, health promotion, social development, personal development, physical development and movement, and orientation to the world of work (Department of Education 2002b). Each of these outcomes attends to the developmental needs of learners. Learners felt that LO provides them with a safe space to communicate openly and honestly about sensitive issues that they do not regularly get to discuss. But as Rooth (2005) cautions, Life Orientation, notwithstanding its capacity to make beneficial contributions to the

education of learners, appears to be beset with problems and complexities which hamper its potential to make a vital contribution to learners' successful living, learning and well-being.

6.3.3.2 Availability and unavailability of school counsellors

Most schools which participated in this study did not have qualified or trained counsellors on staff and, as Principal F vehemently stated, “*We definitely need them*” (c.f. 5.3.3). Only three schools, all former-Model C schools, (viz. Schools C, E and Q) had school counsellors remunerated by the Department of Education. In one school (School D), also a former-Model C school, the school counsellor served as a freelancer who worked closely with resident teachers and he was remunerated by the school governing body (SGB). The rest of the schools either had self-appointed counsellors or management nominated staff serving dual roles of both an educator and a counsellor, but were not remunerated for their counsellor services. In most schools counselling duties are given to people with minimal or no qualifications and are often overwhelmed by the enormous workload. According to Pillay (2011), internationally school counsellors are seen as essential role players in the development of school counselling and career programmes. However, over the years there has been a shift of focus from career and moral development to a current focus that is comprehensive, developmental and collaborative. This was due to changing social, political, economic and psychological issues facing schools, communities and learners. Of necessity, “school counsellors should support learner development not only in academic and career matters but also with personal/social concerns” (Pillay, 2011, p. 352).

School counsellors should work collaboratively with psychologists who are either based at district offices or contracted to the school. According to participants, there are many learners

with serious emotional problems who would benefit from having a counsellor available. Some of these learners are intelligent or very smart and sometimes drop out due to ‘learned helplessness’ and desperation. Learners have problems ranging from sexual abuse, substance abuse, peer pressure, promiscuity, to violence, including domestic violence. The soaring divorce rates – exacerbated by the current recession and economic hardships – also affect learners’ psychological well-being. Family dysfunction is one of the main factors impacting negatively on learners’ well-being. The *status quo* presented here is likely to prevail in many other schools in the province. This means that schools currently are not living up to their expectations. The existence of a School Psychological Services programme would empower learners with skills to handle the issues mentioned above.

The powerful sentiment expressed by participants, especially school principals, serve as a reminder as to the importance of counsellors and psychologists in designing intervention programmes to address issues affecting learners and their educators on a daily basis. Carolissen (2012) posits that the ideal scenario would be to have at least one educational psychologist available at each school or a resident school counsellor. According to Nath and Garg (2008), schools should adopt a ‘one stop’ approach, wherein learners’ needs are met under one roof, by a team of trained professionals. Psychologists and counsellors are expected to promote the well-being of all children but the reality is: ‘All is not well in school psychology’ (Ahtola & Niemi, 2013). On the question whether psychologists and/or counsellors should be employed by schools or the Department of Education (DoE), principals’ opinions differed greatly. Currently, since its inception in 2000, Psychologists are based in District offices of the Education Department with a mandate to attend to learners’ needs. However, the location of psychologist and social workers in

Districts does not seem to be effective in addressing learners problems due to manpower or logistical challenges, for example, having three psychologists serving 189 schools. With a shortage of staff and an ever increasing demand for their services, District-based psychologists are over-stretched, making them ‘small actors’ in a vast education system that has perpetually failed to get things right. This compromises the ‘quality’ of both the services disseminated and client-counsellor relationship. Quality here should be interpreted as the extent to which the programme meets the needs of learners and educators. Despite the fact that they are inaccessible to most learners, they also do not seem to have a good working relationship with schools they serve. As Principal J maintains *“They take ages to respond and sometimes show up when the situation is already resolved”*.

6.3.3.3 Career education (guidance)

Participants indicated that career education and guidance is not offered in many schools. This contradicts Kikas’s (2003) assertion that one of the main activities of school psychologists is career counselling. This places learners at a huge disadvantage since their academic development entails making plans for the future, and choosing a career is the ultimate goal of education. As Maree (2013, p. 416) put it, “career counselling in South African schools was for many years compromised by apartheid ideology, a lack of teacher training in school guidance and counselling, under-resourced schools and the low status accorded career counselling”. Career guidance prepares learners for their entry into the labour market and those who are experiencing uncertainty regarding their choice of career are provided with counselling. It enables learners to make informed career choices in line with their personal competencies, preferences and pursue training for which they are eligible and well suited and this should start as early as grade 9. But,

according to the Organisation for Economic Cooperation and Development (2004), career education is not offered in schools because those who provide it lack specialised training, are not career guidance specialists and very often combine career guidance with other roles, like teaching other school subjects. Consequently, many students leaving school are making career choices with little or no knowledge of what is prevailing in the labour market. On the 18th of July 2010, the current Minister of Higher Education, Dr Blade Nzimande launched the Nelson Mandela Career Guidance Campaign specifically to address the lack of career guidance in schools. The idea behind the launch is for better guidance to help learners make appropriate study choices, optimise their job opportunities and reduce high drop-out rates. The fact that in South Africa one out of every 100 would be guaranteed a school and university education, means that education is a game of chance than opportunity.

Career guidance has an important role to play in assisting young people to shape their life paths by exploring the spectrum of post-school education and training opportunities while they are still in high school. It would lower the universities' drop-out rate because students fail mostly because they have made uninformed and wrong career choices. Guidance services such as psychological assessment, placement services, referral services, orientation services, counselling services, consultation services, evaluation and follow-up services are not offered in most schools precisely because they do not have counsellors. The one type of Psychological Services offered in many schools is the information services since it forms the core of the Life Skills education curriculum, which, according to Rooth (2005), is cardinal to Life Orientation. The United Nations (2003) defines Life Skills as a set of psycho-social competencies and interpersonal skills that help people make 'informed' decisions, solve problems, think critically and creatively, and

communicate effectively, build healthy relationships, empathise with others and manage their lives in a healthy and productive way. Since career guidance is not offered in many schools, it is very unlikely that job-related skills like writing a CV and preparing for a job interview would be taught. This is one of the skills young people need to master before leaving high school,

6.3.3.4 Suicide Prevention Programme

According to participants, schools do not have suicide prevention or suicide awareness and substance abuse prevention programmes. Concerning suicide, Schlebusch (2005a), although there are individual and regional suicide prevention programmes and service agencies, a national suicide prevention programme which has been recommended has not yet been implemented. This means that learners are not educated about drugs, neither does the programme provide psychological support to traumatised and depressed learners who are at risk of committing suicide. This is corroborated by Williams (2010) when she says that using drugs may reduce inhibitions and impair judgement, making suicide a strong possibility. Suicide is rated as the fourth leading cause of adolescent mortality (Wasserman *et al.*, 2005), which contradicts Schlebusch (2005a) who rates it as the third-leading cause of death in the young, and according to Williams's (2010) findings, 70% of all young people who attempted suicide used drugs. According to Herman, Merrell, Reinke and Tucker (2004), schools hold promise as sites for sustainable prevention programming if successful interventions can be wedded to the daily practices of school personnel. Botvin *et al.*, (1990) recommends a cognitive-behavioural approach to substance abuse prevention among high school students. Also, learners infected with HIV and affected by AIDS need psychological support including counselling but such services were not available in most schools.

6.3.3.5 Inclusive education (IE)

Inclusive education and remedial education, which focuses on learners with learning difficulties, were not offered either. This means that the outlook for school success for learners with disabilities is quite bleak, since it is documented that they experience poorer outcomes than do their nondisabled peers (Landrum, *et al.*, 2003). Literature on inclusion indicated educators' views and attitudes towards inclusion, crowded classroom environments, lack of resources and educators' inexperience and lack of knowledge on inclusion as some of the factors hampering its implementation and effectiveness (Ntombela, 2006; Naicker, 2000; Şahbaz, 2011; Muthukrishna, 2002). Through in-service training, as Şahbaz (2011) indicate, counsellors' opinions about inclusion were changed, showing that their ignorance was the result of insufficient knowledge. Inclusive Education should be about preaching unity in the midst of diversity, and should teach learners to celebrate their differences. It should be about creating teaching and learning environments free of discriminatory practices, especially toward learners with disabilities. Teachers and communities should not cast a blind eye when children ridicule others because they are different. Inclusive programmes make it possible for learners with disabilities to thrive in the mainstream than they would in separate special education classes. According to the California Education Support Project (2011, p. 6) "If a child misses school due to asthma, cannot focus due to a toothache, has not physically developed properly due to inadequate nutrition or is preoccupied with fears of violence or faces excess stress, even the best teacher armed with the most interesting curriculum may not be able to teach him".

6.3.3.6 *Psycho-social support services (including counselling and psychotherapy)*

Participants described adolescence as a difficult phase of development as they are confronted by a myriad of developmental challenges. According to Corey (2001), adolescents struggle to define who they are, where they are going, and how to get there. Hence, adolescence is generally viewed as a period of heightened levels of psychological or mental problems, a difficult phase fraught with many developmental challenges (Tartar, 2001; Sigelman & Rider, 2006; Gouws *et al.*, 2000; & Louw, 1991). The HIV infection rate amongst teenagers is relatively high (StatsSA, 2009; UNAIDS, 2002) and such learners need psychological support services, such as counselling and psychotherapy, which are not available in schools. According to Lam and Hui (2010) teachers perceived guidance and counselling as a necessary process to address students' particular problems and meet students' overall developmental needs. Generally, principals indicated that school psychological services would mitigate against social challenges learners' experience, as Principal A states:

Ya, there is a problem of substance abuse and bullying. I think that the bigger problems are dealing with kinds of situations prevailing at home. That is our biggest concern. The child does not just inherit the problem at school. It's usually a problem that is coming from home. It's children with divorced parents; single parents, children living with grandparents, no supervision, absentee mothers and fathers. It's just a whole lot of issues.

However, most of these services are not offered in South African schools.

The conclusion that one draws from this discussion is that currently most schools do not offer Psychological Services, and that a handful that does, do not have a comprehensive programme, which includes a school counsellor or psychologist at the helm and an array of services for

promoting learners' well-being, including learners with disabilities. Adolescents are the most vulnerable or at-risk due to the challenges or difficulties they face daily and need a network of support services. Also, psychological services seem to have a positive effect on learners' well-being and their academic performance.

Policies – a political resource – such as Inclusive Education policy, a policy on substance abuse, a policy on school violence (bullying) and suicide prevention as well as Employee Assistance Programme (EAP) have not been fully implemented in schools. Some of these policies are yet to be formulated and those formulated are gradually being implemented, for example, the Curriculum and Assessment Policy Statement (CAPS) and Inclusive Education policy (White Paper 6) which is currently being implemented in full-service schools.

6.3.4 What are the challenges or obstacles affecting the implementation of Psychological Services, vis-à-vis, Guidance and Counselling, in schools?

Participants had to indicate whether questionnaire items were challenges impacting on the provision of psychological services in their schools (Table 5.4). Principals, on the other hand, had to identify challenges on their own.

6.3.4.1 Lack of professional school counsellors

The main challenge affecting the delivery of Psychological Services in schools, as participants puts it, was the lack of professional counsellors. It is mostly schools with counsellors that have a Psychological Services programme. Five of the schools that participated in this study had

counsellors, either fulltime or as freelancers, who were mainly remunerated by School Governing Bodies (SGB's). This, according to Pillay (2011), is due to the fact that the state has not prioritized the employment of school counsellors because of competing priorities. This makes it impossible to implement a Psychological Services programme in schools, more so in township schools. It is inconceivable, as principals indicated, that a school can have Psychological Services programme without a qualified counsellor providing leadership for such a venture. For that reason the dissemination of career guidance is hampered as educators are not adequately trained to help learners with career decision-making and making choices of career paths. It is important that anybody with an ambition to be involved in the implementation of School Psychological Services have completed some psychology modules. Their broad training in psychology and education put them in an ideal position to integrate and coordinate educational, psychological and behavioural health services. Currently Life Orientation educators have very little or no training in basic counselling skills. Learners experiencing exam stress, peer pressure, those with a substance abuse problem, learners from poverty-stricken families with financial problems – they all need support and expert advice from someone knowledgeable in this respect. This means that there is a need for professional (qualified) school counsellors who would work closely with psychologists and social workers, to ensure that learners' problems were dealt with effectively. Professional development of school counsellors is not solely concerned with supporting counselling and knowledge but allows them to reflect on current practice and adapt new knowledge and beliefs to their own contexts. This would empower school counsellors to meet the diverse needs of learners well.

6.3.4.2 Ill-equipped Life Orientation educators

The Department of Education introduced the FET curriculum without the initial advocacy campaign to inform other participants about its relevance and adequate training of personnel or adequate capacity to implement it. The result is that anybody can teach Life Orientation, especially those who have a lower teaching load or most free periods. The achievement of the goals of an education system depends on the quality of its curriculum. Although Life Orientation is offered in all schools nationally, it is not being taken seriously since “it is the only subject that is not externally assessed or examined” (Department of Basic Education, p. 25) – a free period – and consequently educators and learners see it as a waste of their precious time. Nevertheless, a learner cannot be promoted without passing it. As Mannah (2000) put it, Life Skills in schools suffers a ‘Cinderella’ status and therefore falls to a female teacher. It consequently lacks credibility, and apart from being viewed as a woman’s issue by some male teachers, its periods are used to teach examination subjects.

A study by Rooth (2005), warned against the practice when she mooted that educators responsible for Life Orientation needed to be specialists trained and qualified to teach Life Orientation, instead of assigning it to any educators who have free periods. The result is that Life Orientation teachers/educators are conceptually deficient and methodologically ill-equipped to offer the subject or learning area. According to Prinsloo (2007, p. 158), “educators need to be adequately trained in understanding the content, aims and didactic methods of LO programmes”. This deficiency impacts on its implementation or national roll-out. Sharing the same sentiments, Rooth (2005) says that an advocacy strategy should give educators an opportunity to unpack the learning area, in order to facilitate their grasp of what Life Orientation is. Importantly, as Rooth

(2005) states, the epistemology and skills of the educators who teach the learning area determines the status thereof. Thaver and Leao (2010) contend that the effective implementation of the life skills programme is to a large extent dependent on the quality and quantity of teacher training. Learning, as Rose *et al.*, (2005) put it, is a process of making new interpretations of meaning which influences learners' understanding, appreciation and action, and lack of expertise of the part of an educator compromises that.

Educator involvement and competence are crucial for the implementation of the National Curriculum Statement (NCS), including Life Orientation. Research studies (Rooth, 2005; Christiaans, 2006, Prinsloo, 2007, Van Deventer, 2008) have indicated that the majority of the LO educators are not fully qualified to teach LO and that attending a three-day HIV and AIDS course or a two-hour workshop does not make one competent to offer Life Orientation. According to Darling-Hammond, Wei, Andree, Richardson and Orphanos (2009), professional development should be intensive, ongoing, and connected to practice. Hence, episodic workshops disconnected from practice do not allow teachers the time for serious, cumulative study of the given subject matter or for trying out ideas in the classroom and reflecting on the results. Rooth (2005) and Van Deventer (2008) also warned against the practice of assigning LO to any educators who have free periods and indicated that they must be chosen according to the skills or competencies they possessed. They must be skilled practitioners who are conversant with lifeskills and also be regarded as career education specialists. As Prinsloo (2007) puts it, the importance of LO can only be brought to the fore by an educator best suited to teach it. This practice of haphazard or convenient assigning exacerbates the marginalisation and underrating of LO by both educators and learners. The state and status of this learning area depend on the

educators who offer it and how it is managed by the School Management Team (SMT). Hence, it is important that LO educators have some psychology background. With rapid and continuous changes in the FET curriculum it is unrealistic to expect a thoroughly trained and experienced LO educator in schools.

6.3.4.3 Lack of resources

The delivery of Psychological Services is – according to participants – dependent on the availability of resources. According to Kitzrow (2009), it is critical that counselling centres have the necessary resources to carry out the mission in an effective and ethical manner since it is both ethically unwise and legally risky to attempt to carry out a treatment mission with inadequate resources. Resources are the lifeblood of any programme, without which implementation would present a huge challenge. Resources, including personnel, material resources, financial and physical resources present a major challenge in the provision of Psychological Services. According to Kikas (2003) tough economic situations prevent schools from implementing increased access to school psychologists/counsellors. For example, in some schools the counsellor is a ‘free-lancer’ who is only at school one day a week. Apart from personnel, there is need for material resources, financial resources, physical resources and time allocation. A counsellor should have an office for student consultations. A common problem in most South African schools is the pervasive shortage of classrooms. Class size and a high teacher-learner ratio are other impediments affecting the delivery of Psychological Services. McLaughlin (1999) contended that due to curricular pressures and the concomitant pressure on time, teachers were finding it difficult to help learners sort out their in-school problems and that the demands of ‘getting through the curriculum’ was reducing the time educators had available to help students.

According to participants their schools did not have funds to implement Psychological Services. This is especially the case in township schools where most parents cannot afford to pay school fees. It is unimaginable that such schools will have the equipment, tests and test materials, career information books, computer software on careers and office space for delivering Psychological Services. Only 30% of schools which participated in this study were former-Model C schools, which are self-sufficient institutions which charge exorbitant fees and can afford to implement programmes without governmental support. These schools can afford to employ counsellors or have psychologists visiting them once per week.

6.3.4.4 School counsellors' multiple roles

The dual role of 'teacher-counsellor' is problematic as there are differences between the two roles and are sometimes incompatible. According to the Australian Psychological Society (2013) the roles of teacher and school psychologist/counsellor are intrinsically separate and ethical dilemmas involving dual professions and multiple relationships occur when combining the two hence, the practice should be avoided. Perfect and Morris (2011) indicate that multiple (dual) relationships have a potential negative impact on the psychologist or school counsellor's objectivity and judgment, and the establishment of conditions that may lead to the exploitation of students and/or their parents or guardians. Learners are more likely to be confused about the boundaries within counsellor/client and teacher/learner. Low (2009) refers to it as role ambiguity and points out that students' perceptions shape their expectations of school counselling services. School counsellors who are seen in more administrative roles and managing school affairs were considered less approachable by students (ibid). Hence, according to Howieson and Semple

(2000, p. 385) learners indicated that they preferred a full-time guidance counsellor who would not have a subject teaching role. In this way counsellors would exert leadership as change agents for the profession as well as their schools.

6.3.4.5 Marginalisation of Life Orientation

Since school guidance is not offered in most schools, it goes without saying that it – together with Life Orientation – seldom features on the timetable, neither has it been allocated time. Teaching of examination subjects has a high priority. Consequently, lessons on either guidance or Life Orientation have to be negotiated. Hence, its ‘cinderella’ status, taught by female educators and its periods are used to teach examination subjects (Mannah, 2002).

6.3.4.6 Lack of parental involvement

Importantly, School Psychological Services would have an impact on learners if parents are involved. This is a prerequisite for the effective and efficient implementation of the programme services otherwise it becomes an exercise in futility. Hughes (1985) observed that it is difficult to conceive of any worthwhile system which would not aim to involve parents as their cooperation is crucial for children to derive maximum benefit from the programme. In the words of George Santayana (2010), a child educated only at school is an uneducated child. This means that the lack of parental involvement is a factor which affects the quality of the educational programme and its products. Parental involvement is important in the delivery of Psychological Services, but according to participants, teachers seem to regard the involvement of parents as inconsequential or irrelevant. As Chen and Gregory (2011) put it, greater parental involvement is associated with a wide range of positive learner indicators, including higher grades, more consistent school

attendance, and fewer discipline problems. Parental involvement through parents' evenings and cooperation with teachers can help reduce bullying in schools (Samara & Smith, 2008). Chen and Gregory (2011) found that when parents helped develop interventions, they were more satisfied with their child's progress, felt that their child was more successful, and felt the intervention plan better addressed their child's needs. To thrive, children need engaged and interested adults around them, especially parents or guardians. Parental involvement helps schools to develop plans for behaviour modification with parents and carers. This presupposed alignment between the interventions and the child's needs. This lack of parental involvement may be one of the reasons the principles of the NCS did not help transform education for learners. Opportunities for change occur through grassroots efforts.

Despite this, schools continue to ignore the role of parents in shaping young minds and would only invite them when they have failed to deal with problems. Parental and community involvement in the education of learners may help address learners' behavioural problems and attitudes. According to Herman *et al.*, (2004), successful school programming cannot occur in isolation and community-school linkages are needed to foster resilience and competence in children across the multiple systems where they live and play. School psychologists and counsellors should be at the forefront of these efforts, as front-line mental health workers. Schools can empower parents by inviting them and conducting skills development workshops on common issues affecting their children. In situations where parents are illiterate, schools can – through Psychological Services – educate them about supporting learners and caring. According to Hill and Tyson (2009, p. 742), “parental involvement is positively associated with academic achievement, especially academic socialisation which includes parents' communication of their

expectations for achievement and value for education, fostering educational and occupational aspirations in their adolescents”. Emphasizing its importance, Fullan (1991, p. 227) says that “the closer the parent is to the education of the child, the greater the impact on child development and educational achievement”. According to Thaver and Leao (2010, p. 89), “while sex education does have a positive impact on youth’s sexual behaviour, the extent of that impact is dependent on how sex education is implemented in a community context”. Parents must take the lead in teaching their children about sex and sexuality as part of their socialisation processes (*ibid*). Emphasising the issue, Gutkin and Conoley (1990) says that if school psychologists hope to bring about any meaningful improvements in the lives of children, they will have to exert meaningful influence on parents and teachers.

6.3.4.7 Learners’ lack of awareness of available services

Exacerbating the anomaly, learners are not aware of the services that are available and consequently few access them. Learners indicated that counselling is not widely known about, as nothing is done to promote the services in schools where they exist. A surprising finding, according to Kikas (2003) was that consumers (i.e. learners) knew very little about the work of psychologists/counsellors, neither did they know that there was a psychologist/counsellor in their school. It is important, for humane reasons, to inform learners about Psychological Services and what and how they stand to benefit from the programme. If learners are not aware of the services available, how would they access them? Many learners do not know about Psychological Services, let alone guidance and counselling. Similar findings were reported by Fox and Butler (2007) when they said that simply knowing that the services exist is insufficient. Learner need to know what counselling is, who the counsellor is, what he or she does, and how to make an

appointment. This also applies to Psychologists and Social Workers based in districts. There has to be better promotion of the services for more learners to be aware of the services that are available to them on a daily basis.

In a similar study conducted at a university locally, only a proportion of students suffering from mental health problems received counselling services. Tatar (2001) calls it the ‘avoidance-avoidance conflict’, a dilemma of choosing between suffering in silence or approaching a stranger and consequently being subjected to the societal stigma. According to Flisher, De Beer and Bokhorst (2002, p. 299), “there are many reasons given for the non-use of counselling services, which includes, low expectations of benefiting from counselling; a negative attitude; lack of adequate information about the services; concern about confidentiality; a belief that their problems were not serious enough; fear of being uncomfortable; and lastly a belief that it is better to solve one’s own problems without relying on professionals”. Importantly, as Flisher *et al.*, (2002, p. 306) point out, “how well an individual copes with stresses of life is not a function of the personal coping mechanisms but also of the number and strengths of the individual support systems”. Individuals who experience significant life stress but who have strong social support are protected from developing symptoms associated with stress (*ibid*).

Ciarrochi *et al.*, (2002) maintain that there is a link between emotional competence and help-seeking. This means that adolescents low in emotional competence feel more hopeless and consequently less likely to seek help, whereas the emotionally competent adolescents have had better experiences with mental health professionals and are more likely to seek help. The same fate can be said about the Employee Assistance Programme (EAP) or Employee Wellness

Programme (EWP) which was implemented in South Africa in the 1980s as a welfare system focusing on employees' physical and mental health (including psychological problems) and their impact on employee performance (Pillay, 2005; Harper, 2008; Terblanche, 2009), but it emerged during the interviews with principals that teachers are not aware of its existence and how it can assist them. Despite the fact that by 1996 almost 42% of South Africa's top 100 companies had implemented EAP's or EWP's, as Terblanche (2009) reveals, it is still regarded as a new workplace phenomenon and is consequently under-utilized. According to Dawson and Singh-Dhesi (2010) a healthy school environment must include the emotional well-being of its staff, as they too require emotional and psychological support. This means that the department must ensure a proper understanding of EAPs by teachers. Corroborating this, Lam and Hui (2010) maintain that teachers' own well-being affect their ability to provide quality student-teacher relationships that are the foundation for guidance and counselling.

6.3.4.8 Lack of sex education

Another challenge which impacts on the delivery of psychological services was the lack of sex education. Sex education is the cornerstone on which most HIV and AIDS prevention programmes rest and a compulsory part of the school curriculum and the high prevalence rates of HIV amongst 14-24 year olds have added urgency to the issue (Francis, 2010). According to Gilbert (2007), in their social and psychological development, adolescents need information about the most intimate aspects of life and "sex education is necessarily entangled in their efforts to construct self, find love outside family and enjoy their newly adult body" (*ibid*, p. 47). It remains a controversial issue in many countries, especially with regard to the age at which children start receiving such education, the amount of detail that is revealed, and topics dealing

with human sexual behaviour. Sex education is a vital public health strategy as it equips learners with information about sexual intercourse, sexually transmitted illnesses as well as the dangers of promiscuous behaviour. During adolescence young people begin to experiment with their sexuality and often some bad sexual choices are made. This means that they need age-appropriate information about sex, help them make responsible decisions and simultaneously equip them with the skills and confidence to delay sex until they are ready. The silence around sexuality and cultural realities of taboos were overwhelmed by campaigns to ‘love the children enough to talk about sex’ (*ibid*).

Ideally, all children should receive basic sex education from an early age, preferably before the likely commencement of sexual activity (Gillis, 1996; Kohler et al., 2008; Fox & Butler, 2007; Sathiparsad & Taylor, 2011; Macleod & Tracey, 2010). They need to understand the impact of sexually transmitted diseases, be aware of the dangers of sexual promiscuity and factors causing teenage pregnancies. Encouragingly, according to Macleod and Tracey (2010), the average age of sexual debut has increased from around 14 years to around 18 years, indicating that education is making some difference by reducing vulnerability to risky sexual behaviour. Blake (2008) identified different approaches to sex, with more affluent young people having sex later and investing in the future, while those from lower social classes use sexual experience and sexiness to improve their social status. Although, according to the HSRC (2009), there is no magic bullet for teenage pregnancy, and given the multiple levels of influence on adolescent sexual behaviour, school-based sex education will provide young people with information and skills required for them to make informed choices. This can involve a comprehensive approach that addresses abstinence and safe sex practices and engaging peer educators (HSRC, 2009). Thaver

and Leao (2010) suggest that teaching about sex should focus on class discussion and problem-solving, and emphasise the development of skills rather than the transmission of information. According to Francis (2010) for sex education to be effective, it must meet the needs and interests of young people and this happens when they are able to make an input about their sexuality. As Francis (2010) points out, all young people attend school before engaging in sexual intercourse, which means that schools are well placed as intervention sites. However, the biggest challenge is that although sex education was integrated into the LO curriculum, educators are inadequately trained to deliver the content confidently and effectively (Rooth, 2005). Still, the reintroduction of school counsellors (guidance counsellors) at schools would help implement clear intervention policy to constructively and comprehensively address the surging rates of teenage pregnancy in schools.

6.4. Conclusion

The main object of School Psychological Services is to aid the school in ensuring the fullest possible development of each child's personality in consonance with the needs of the society. Through psychological services schools will develop the capacity to meet the academic, psychological, behavioural and social needs of an increasingly diverse student body. A short-sighted policy confines its services solely to detecting and treating maladjusted or failing children. The prevention of educational, social or emotional disturbance and constructive amelioration of the school and home environment of children are less costly than the treatment of cases which have been allowed to develop to a point where something drastic must be done. The sentiment by Crespi and Hughes (2004, p. 75) that "adolescents are in crisis, and many are not

receiving supportive mental health services” is true to this day, especially in South African schools.

Chapter 7 provides a summary of findings, a theoretical analysis of findings, implications and recommendations, and the conclusion of the study. The chapter also includes a brief discussion of some of the key limitations of the inquiry.

CHAPTER SEVEN

IMPLICATIONS, RECOMMENDATIONS, LIMITATIONS AND CONCLUSION OF THE STUDY

“We cannot use the kind of thinking that created the problem to solve the problem”

[Albert Einstein, cited by Memela in ‘The Sunday Tribune’, August 23, 2009, p. 23]

7.1 Introduction

The words of Nelson Mandela that “there can be no keener revelation of a society’s soul than the way it treats its children” (African Leadership Initiative, p. 5) resonates with the gist of what the study is about, which is participants’ perception of the contributions of Psychological Services to the learning and healthy development of children and adolescents and how that adds value to their educational achievements. School Psychological Services need to evolve to meet the changing needs of schools in the 21st century. Learners, educators, school counsellors and principals offer an important voice and unique perspective to national dialogue about promoting emotional wellness among the nation’s youth. Through School Psychological Services the nation becomes aware of how learners’ mental health and behavioural problems affect learning and the difference therapeutic intervention programmes including counselling can make.

The study was judged necessary given the preliminary research indications revealing the possibility that the implementation of aspects of School Psychological Services were inadequate (Mbuyazi, 2002; Naicker, 2000; Ntombela, 2006; Prinsloo, 2007; Rooth, 2005; Ruddell & Curwen, 2002). As Van Niekerk and Prins (2001, p. iii) put it, “the health of our population is threatened by such abnormalities as HIV/AIDS, drugs and substance abuse, teenage pregnancy,

violent crimes, including crimes against women and children, poverty, malnutrition and homelessness. These undermine the well-being of youth and in the process negatively impact on our ability as a country to compete in an increasingly globally-competitive environment”. Education is no guarantee of success against these odds but remains the best way out of poverty and other social ills.

7.2 Summary of findings

Years of racial discrimination have affected the psychological well-being of most South African youth, more so township (black) youth. According to Lockhat and Van Niekerk (2000) the apartheid years were characterised by a programmed attack on and an erosion of the black children’s right to achieve basic mental health, with destructive effects on their well-being. As an emerging economy, the chances of exposure to high risk influences during the early critical years are much higher given the widespread poverty and under-developed services (Petersen *et al.*, 2010). This incites a debate on whether they should be considered ‘damaged victims’ or ‘resilient survivors’ (Lockhat & Van Niekerk, 2000). Results of the study seem to suggest that Psychological Services are in a state of disarray and that South Africa is below par with global trends. Psychological services were not implemented as planned in most schools and where they exist only a few services were offered. Participants are basically in accord that we need learners who are capable and confident and who will in future be productive, responsible, caring members of the workforce and the community. While academic proficiency is of paramount importance in our literate society, social and emotional learning are also crucial for the kind of success we want for our children. According to Terjesen *et al.*, (2004, p. 167), “by building

people's personal and social resources, positive emotions transform people for the better, giving them better lives in the future". Thus, the role of psychological services in schools cannot be disputed.

The following is a concise summary of the findings of the study, viz. participants' experiences of School Psychological Services and their perceived impact of psychological services on learners' well-being:

7.2.1 Participants' understandings of school Psychological Services and their impact on beginners' well-being and academic performance:

The question was meant to establish if participants understood the concept under investigation. Results of the study were that, though the concept was relatively novel and new, it was generally considered by participants as being synonymous with school guidance and counselling. School Psychological Services are multifaceted since they include a variety of services, some of which are part of the Life Orientation curriculum, some were offered as standalone services, for example, inclusive education. Participants, mainly counsellors, mentioned services which form the backbone of a Psychological Services programme, such as assessment, counselling, consultation, guidance, referral, and follow-up. Contrary to the school counsellors' description, learners -though not very accurate - have demonstrated some level of understanding of what school psychological services are and what they are meant to achieve. Their overriding conception of Psychological Services is services meant to assist learners with problems. Hence,

participants unequivocally indicated that access to psychological services by learners and educators is an absolute must as it influences their well-being and academic performance.

Results of the study indicate that participants overwhelmingly stated that there was a relationship between learners' psychological well-being and their academic performance. The provision of Psychological Services influences learners' psychological well-being or mental health which has a positive impact on their academic performance. Psychologists, counsellors and social workers, through a programme of psychological services can attend to learners with serious emotional or psychological issues which impacts on their ability to achieve their full potential academically. As Thuneberg's (2007) puts it, school achievement is related to basic needs fulfilment and self-regulation. Through School Psychological Services learners are encouraged to explore, get more concrete and mental material to investigate, and achieve a greater sense of competence (Thuneberg, 2007). On the other hand, studies by Quinn and Duckworth (2005), Voitekane *et al.*, (2006) have demonstrated an association between subjective well-being and school success, suggesting that happiness and academic achievement are mutually reinforcing, that is, children who perform well in school may do so in part because they are happy, and performing well academically may make children happier. Voitekane *et al.*, (2006) maintain that students with a high level of perceived social support have higher level of self-esteem and assertiveness, which indicates their potential for self-actualisation. In slight contrast, Terjesen *et al.*; (2004) maintain that targeting and nurturing individual strengths such as optimism, courage, future mindedness, honesty and perseverance rather than focusing on repairing their weaknesses is a more efficacious strategy to get children to perform to their fullest potential. Their reasoning is that

deficit lenses makes one focus strictly on pathology which may not provide a complete understanding of all aspects of human functioning.

The lack of Psychological Services exacerbates the prevalence of psychological distress and depression amongst learners which, in turn, has a negative influence on their academic performance (DeRoma, *et al.*, 2009; CCCSMHP). As Schlebusch (2005b) puts it, depression, especially major depression, is a very serious and life-threatening condition which needs to be treated with great care and circumspection. People with HIV and AIDS are up to 36 times more likely to be suicidal. According to Page, Saumweber, Hall, Crookston and West (2013), suicide ideation is a threat to the health and well-being of young people and since they spend substantial time in school, the school provides an ideal arena for suicide prevention and mental health promotion efforts. The availability of Psychological Services has the potential to reduce incidents of depression and suicide amongst learners, hence, Sun and Hui (2007) assert that having a caring and supportive school system is vitally important in fostering adolescent psychological health. School psychologists and counsellors should play integral roles in the process of designing and implementing youth suicide risk assessment, prevention, and intervention strategies and procedures (Page *et al.*, 2013). According to Schlebusch (2005a) the loss of one young person through suicide is one too many, and the faces of the young need to be filled with hope, not hopelessness which is the link between suicidal ideation and acting on it. Hope is explained as the sum total of the willpower and way-power that people have for their goals; willpower is the driving force for individuals to reach their goals, the reservoir of determination and commitment. Way-power is defined as the mental roadmap that guides

hopeful thought (Mawire, 2011). Lindsay Ord (2014) maintains that there is need for people to dispel the ‘cowboys don’t cry’ attitude and seek professional help when depressed.

It is important that participants have a better understanding of Psychological Services and that all learners, with or without disabilities, must have unlimited access to such services as this would enhance their emotional well-being and academic performance. Through Psychological Services counsellors and psychologists can help learners ‘construct’ meaning, motivate and help them grapple with issues and enhance their self-esteem and emotional competence. Counselling can restore hope and empower individuals to realise their strengths and utilise their mental resources to ‘bounce back’, and consequently see some ‘light at the end of the tunnel’.

7.2.2 Learners’ needs for Psychological Services as identified by participants:

The findings highlight the need to recognise adolescents’ basic and developmental needs and understand how the secondary school environment can either support or hinder them as they make the transition. Adolescence is by nature a stage where young people discover themselves by being able to handle the challenges that life presents them. In order to accomplish this they need emotional support from their educators, counsellors, social workers, parents and their peers. Improved accessibility to Psychological Services would promote learners’ well-being and emotional contentment. This presupposes the need for Psychological Services as an important aspect of education. Participants identified the following as need areas for School Psychological Services:

Career education and guidance: It is important to link current education to the world of work. Career education is necessary to satisfy the identity and self-actualization needs of learners, and would help learners plan for future career (i.e. lifelong career planning), develop skills, values and appropriate attitudes, developing job searching skills, CV writing skills, and interview skills. Learners will gain knowledge of available careers, entry requirements, the role of career in one's life, and the realisation that most adult life is spent in career and, ultimately, that appropriate career choice is a *sine qua non* for a happy and productive life. It is about helping young people choose career paths based on their potential or aptitude. It is participants' opinion that the guidance programmes in most schools have not helped learners gain sufficient information about themselves, that is, what they can and cannot do, and the career options they can explore. Students mostly drop-out of tertiary institutions because they have made bad and uninformed career choices and failed to take cognisance of their strengths and weaknesses. Also, it is important that staff providing guidance have nationally accredited or recognised competencies to identify and address learners' needs and, where appropriate, refer them to more suitable provision/service.

Social skills development: Adolescence is characterised by peer pressure, risk-taking syndromes, experimenting with sexuality, identity formation, substance abuse, rebelliousness and difficulties in relationships with parents and peers etc. All these mean that there is a need for Psychological Services to address them. Most teenagers battle with impulse-control issues which if not properly handled can be the source of serious psychological disturbances.

Guidance: The provision of information to enable young people to make informed choices is the basis of guidance as a form of a psychological service. Young people should be hungry for information about all things around them which have an impact on their well-being. Adequate information is needed because it influences their decisions. The goal of guidance is self-understanding and understanding the world around each individual learner. It helps them acquire knowledge and skills (e.g. decision-making skills) to lead normal and productive lives. Through guidance schools prepare young people for future adult roles.

Counselling and support: A person-to-person interaction between learners and counsellors is essential to promote the mental health of youth. Adolescents are confronted with a multitude of challenges some of which overwhelm their coping capacity and these create a reality which makes them vulnerable. Psychological Services – specifically counselling – fosters an opportunity for young people to talk about their problems and get expert opinion on the issues. It should be seen as part of the work of the school, a structured communicative process aimed at facilitating learners' quality of life in the face of adversity. Counselling – or the 'talking cure' – is growth engendering, prevention and remediation oriented, whilst it educates learners, enables them to reflect, and promotes their welfare. Through counselling learners would be able to set or define goals, make decisions, solve problems and make wise and informed career decisions. According to Tatar (2001), despite counsellors offering counselling services to all learners, their primary consideration must be those with problems. Hughes (1985) posits that counselling should be seen as part of the 'welfare curriculum' which has a valuable part to play, not only in providing help for individual students, but also in helping the school to provide for young people a realistic education for life in a contemporary society. With increasing rates of violence in

schools, especially sexual abuse, bullying and cyber-bullying, victims of such acts can benefit from one-to-one counselling, a session which would comfort them and help them heal.

Sexuality education: Schools should, as part of SPS, offer comprehensive sexuality education which empowers young people to take care of themselves. Hence, Panday, Makiwane, Ranchod and Letsoalo (2009) maintain that although most young people in school have not initiated sexual activity, but for some schooling coincide with the onset of sex. Sexuality education is about the promotion of sexual health, the integration of the physical, emotional, intellectual, and social aspects of sexual being in ways that are positively enriching, and that enhance personality, communication, and love. According to the Department of Education (2004); Witmer (2010); Vincent (2007) and Sciarra (2004), sexuality education is a central component of programmes designed to reduce the prevalence of sexually-related medical problems, such as teenage pregnancies, sexual abuse and sexually transmitted infections including HIV, by providing age-appropriate information to learners on a variety of topics. Young people need accurate information about human sexuality, including growth and development, human reproduction, anatomy, physiology, masturbation, family life, sexual orientation, safe sex, contraception, abortion, sexual abuse, HIV and AIDS and other sexually transmitted infections (STIs). This has potential to increase delay in sexual debut as it will impact on behaviour change as information influences young people's decisions. According to Rooth (2005) risky sexual behaviour poses a serious threat to the well-being of learners. Sexuality education is the lifelong process of acquiring information and forming attitudes, beliefs and values as it is about providing age-appropriate sex information to young curious minds. However, the provision of sex education must be accompanied by the provision of emotional support. Importantly, as Panday *et al.*,

(2009) point out, reviews on school-based sex education programmes demonstrate the effect of such programmes in improving knowledge, they, however, did not demonstrate strong effects on improving skills, changing values and norms, and changing behaviour. According to Vincent (2007), reducing the incidence of teenage pregnancy is not the only purpose of education about sex and relationships, but it is a very important one.

Health education: Health education is not only about HIV and AIDS, but about the creation of an environment conducive enough to support learners' state of good health. This would prevent outbreaks of diseases and lower the rate of absenteeism. Teaching learners about the dangers of smoking, the consumption of alcohol, safer-sex practices and the taking of drugs and the importance of following a healthy lifestyle is health education. Through a school health programme educators would be able to identify potential health problems of learners and consequently implement a comprehensive health education programme. Sick children cannot attend school and, according to Colby *et al.*, (2000), children's illness is a primary cause for absenteeism. Hence, the provision of health services can significantly contribute to learning by reducing absenteeism and inattention. This essentially is what health-promoting schools are about, that is, achieving healthy lifestyles for the total school population by developing supportive environments conducive to the promotion of health through the provision of a safe and health-enhancing social, psychological, spiritual and physical environment. As Mannah (2002) succinctly put it,

“as educators at this crucial time in our history we have a responsibility to inform and change behaviour, HIV and AIDS is a threat to all of us. We have defeated our colonial masters and *apartheid* – schools were the battlegrounds against our

oppressors. A new war of liberation has now been called for, but the enemy is far more sinister and lives within us – it stalks our playgrounds, our classrooms and our communities. We have to be ready for it. There is no time to waste. For every minute wasted one of us dies” (Mannah, 2002, p. 169).

Inclusive education: Schools should cater for the needs of all learners, irrespective of their characteristics and disadvantages. Education is a basic human right and schools should accommodate all children regardless of their physical, intellectual, social, emotional, and linguistic conditions. There are many learners with disabilities and difficulties who need counselling, largely because they are conscious of their ‘differences’. They want to be accepted by their peers as ‘normally’ as possible, otherwise they will get upset or feel socially isolated. When we make learners with disabilities feel abnormal (different) or less human than their counterparts, it affects their self-esteem and their feelings of self-worth. According to Naicker (2000) all learners can learn and succeed, but not in the same way in the same way and all learners must be provided the time and assistance to realise their potential. The expression “the separate cannot be equal” shows how destructive and self-defeating segregation is. This is not only unethical, it is wrong and unconstitutional. All schools should have resources, including increased budget allocation, to implement inclusive education - a must in a democratic state. All human life is sacrosanct and must be valued. Children should be made to understand this, and through Psychological Services educators can get the message across. Lombardo (2000) suggests that, for effective implementation of inclusive education, Education Support Services (ESS) shift from focusing on individuals and adopting curative measures, to a systems change in approach

which would focus on social problems affecting learners and effecting (mental) health promotion.

Life Skills education: Life Skills are a set of psycho-social competencies and interpersonal skills that help people make informed decisions, solve problems, think critically and creatively, communicate effectively, build healthy relationships, empathize with others, and manage their lives in a healthy and productive way (United Nations, 2003). They are abilities for adaptive and positive behaviour that enables individuals to deal effectively with the demands and challenges of everyday life (WHO, 1997). According to WHO (1997), there are a core set of skills that are at the heart of skills-based initiatives for the promotion of health and well-being of children and adolescents. They are decision-making, problem-solving, creative thinking, critical thinking, effective communication, interpersonal relationships skills, self-awareness, empathy, coping with emotions, and coping with stress. Life Skills include skills that enhance self-empowerment, promote personal health and are future-oriented (Theron & Dalzell, 2006). Fostering positive qualities in young people will be more effective than remediation of problem behaviour. Life skills education is an important aspect of School Psychological Services and plays an important role in the promotion of learners' mental well-being.

The learners' services discussed above are essential for satisfying learners' needs and simultaneously promoting their mental health and academic development. Failure to provision such services puts learners at a huge disadvantage as they would battle to face challenges confronting them, which could be detrimental to their well-being and academic performance.

7.2.3 The current status of Psychological Services in schools (including types of services and resources):

The theme focuses on services currently on offer, and though different, is closely related to theme one. There are a variety of Psychological Services which learners should have access to. This includes – amongst other things – counselling, guidance, Life Skills education, health education, career guidance, sex education, inclusive education and learner support. Most of these services are infused into the Life Orientation curriculum whereas others are offered as standalone services. The introduction of Life Orientation has proved to be ineffective in addressing some of the mammoth challenges confronting learners daily. The main concern with Life Orientation is that it does not provide for person-to-person counselling, the backbone of any programme of Psychological Services. It is the one the most important aspects of School Psychological Services the absence of which was lamented by many participants. Counselling happens when a school counsellor or psychologist offers specific help and psychological support to learners experiencing problems. Its focus is on student development and academic support. This in most cases involves liaising with parents and other participants. Learners of all races and creeds can benefit from the expert advice of a school counsellor concerning making informed choices in life and handling challenges along the way. Secondly, Life Orientation is seen as a ‘free-for-all’ which can be taught by anybody especially those with a low teaching load. Also, due to the fact that it is non-examinable⁵, it is mostly under-valued, marginalised and its periods considered ‘free’ periods. The epistemology and skills of the teachers who teach the learning area determines the status thereof. The implementation of inclusive education would help learners

⁵ Although Life Orientation is examinable as a school subject, its rating is not considered by tertiary institutions and colleges.

with a myriad of learning disabilities such as ADHD, autism, dyslexia etc. With so many developmental hurdles to contend with adolescents are often overwhelmed by the demands and consequently need counsellors to restore some sanity, give them hope and enhance their state of mental health. It is obviously a huge disservice to young people that schools do not have counsellors to help learners negotiate some of the most difficult challenges in life, sometimes with disastrous consequences (e.g. teenage suicide, bullycide).

There are a myriad of factors which compromise the quality of School Psychological Services, which includes organisation, structure, and resources (including personnel). Most schools do not have trained personnel to offer guidance and counselling services. In addition, in-service training programmes offered by the department are haphazardly organised and inadequate to equip educators with appropriate competency skills. According to Stobie *et al.*, (2002), continued professional development is the lynch pin to meeting challenges and change. As Darling-Hammond *et al.*, (2009) avers, one basic principle for policymakers to consider is that professional development should be intensive, ongoing, and connected to practice. Occasional workshops lasting less than a day do not adequately address the shortage of expertise. Without this vital ingredient, services are likely to deteriorate into mediocrity, routinization of practice and inability of programme to respond to both external and internal change. Nonetheless, it is inconceivable that one can produce a skilled, knowledgeable and competent school counsellor or Life Orientation educator by a two-week skills training workshop. There is a perception that educators offering the learning area (subject) are not adequately trained and consequently ill-equipped to handle the demands of the learning area. This – to some extent – compromised the quality of the end-product. As Naicker (2005) and Rooth (2005) put it, a one week training

session does not prepare educators for the implementation of Life Orientation, neither does it offer them theoretical framework nor does it emphasize the epistemological differences between the old and the new curriculum. The feelings of most participants were that Life Orientation was not held in high esteem even by the educators who offered the learning area. The lack the uniformity in the training of LO educators and the fact that they come from a diverse range of fields makes them feel inadequately equipped to deliver the services confidently and effectively.

Concerning their opinions on services and their level of satisfaction with them, participants expressed their dissatisfaction with the fact that most services were not offered in their schools, especially career guidance and counselling. Contradicting educators and school counsellors, learners indicated that they were not getting enough information about careers, the relationship between school subjects and careers and needed help with career decision-making. This was mainly due to the fact that they felt that their educators were ill-equipped to assist them with career choices and counselling those with problems. Hence, vocational or career education is not offered to most learners, especially those in matric (i.e. Grade 12) who are just about to proceed to tertiary institutions. Sex education, which is still seen as a taboo topic to many, continues to be evaded by educators. Despite the fact that young people are sexually active and the teen pregnancy rates continue to escalate, educators are either uncomfortable to tackle the issue or incompetent to deliver what is seen as an important part of a well-balanced education. Also, sex education improves knowledge but does not seem effective in improving skills, changing values and changing behaviour (Panday *et al.*, 2009).

Participants indicated that Life Orientation curriculum covered topics that were mostly important and equipped them with values and skills to negotiate the courses their lives took. They were of the opinion that Life Orientation generally helps them with problem-solving skills, decision-making skills, assertiveness training skills which would be handy for handling challenges such as peer pressure, relationship problems, and lifestyle choices. Such a curriculum has the capacity to curb school violence and the prevalence rate of substance abuse related problems. As these issues are complex and multifaceted, individual efforts from schools will not be sufficient to counteract them, hence the need for unified and coordinated response. The provision of counselling services would enable learners and many victims of violence and abuse to deal directly with issues affecting them individually.

Services such as psychological assessments, consultation, making referrals, counselling, and follow-ups are the lifeblood of an effective programme without which learners' problems or challenges would be difficult to identify and design an intervention plan for. And resources (human, material, financial and otherwise) are essential for the implementation of an effective School Psychological Services programme.

7.2.4 Challenges impacting on the provision of school Psychological Services

The study revealed and identified many obstacles which impacted on the provision of School Psychological Services. An escalation in the rates of violent attacks in schools, substance abuse-related problems, HIV and AIDS infection, learners' disciplinary problems and risky behavioural patterns were some of the concerns which participants raised. These problems were attributed to

– amongst other things – the lack of Psychological Services in schools. Other factors are government’s policy on HIV and AIDS, and socio-economic factors such as unemployment and poverty. In line with this thinking, it is inevitable that Guidance and Counselling services be revived to deal with these issues. The situation was exacerbated by the phasing out of school Guidance and Counselling by the Department of Education. Though the above concerns could be better handled by qualified counsellors or psychologists, schools do not have access to these services as most do not have counsellors or psychologists on staff. According to Schlebusch (2005a) the reduced number of teacher-counsellors in schools, due to rationalisation, is of concern and should be addressed, as it has a negative impact on the mental health of learners. Even where there are counsellors, the number of guidance periods is limited and counsellors have to teach mainstream subjects as well. The issue of counsellors performing a dual role of educator and counsellor conflates the matter as many would consider the teaching role as a distraction. Also, the practice of employing school counsellors as freelancers does not provide learners with unlimited access to Psychological Services. This makes schools incapable of handling the challenges posed by socio-economic factors on learners’ well-being. Life Orientation which is mostly relegated to a ‘cinderella’ status which can be taught by everyone is marginalized and underrated by both educators and learners. It should be taught by specialists (Rooth, 2005; Van Deventer, 2008; Prinsloo, 2007). It still remains the most credible vehicle for the dissemination of School Psychological Services. According to Panday et al., (2009), although life skills programmes were introduced in schools in response to the explosion of the HIV epidemic in the 1990s, to increase learners’ knowledge of HIV, improve their relational, communication and decision-making skills and influence their attitudes about people living with HIV and AIDS, they demonstrate little or no effect on behaviour. The evidence for the

effectiveness of sex education in South Africa is not convincing, and we need to focus on how its effects can be optimised (*ibid*). This can be circumvented by employing school counsellors as specialists and providing pre-service and in-service training programmes for Life Orientation educators and improving their levels of competency and skills and simultaneously removing the discomfort of talking about sex.

In addition, inadequate parental involvement makes the dissemination of services difficult because schools cannot on their own deal with learners' behavioural problems. Greater parental involvement is associated with better academic performance, regular school attendance and fewer discipline problems. Parental involvement through parents' evenings and cooperation with teachers can help reduce bullying in schools (Samara & Smith, 2008; Chen & Gregory, 2011). When parents participate in designing intervention plans, they are very likely to be satisfied with their child's progress, and that the plan better addressed their child's needs. Children need engaged and interested adults around them in order to thrive, especially parents or guardians. A programme meant to improve on the well-being of learners should be a collaborative effort on what learners' needs are and how they could be met. Collective ownership of the programme would promote a deeper understanding of the programme and facilitate its smooth implementation as parents and learners would not feel that the programme is imposed on them.

One of the concerns raised was the perception by learners that the Department of Education was not interested in the implementation of Psychological Services. Schools do not have the resources necessary for the delivery of good quality Psychological Services. An example thereof is the fact that the programmes in most schools are not capable of meeting the needs of learners

with special needs. This is largely because the implementation of inclusive education has proved to be a difficult undertaking, with shortage of resources being the main drawback. A properly structured Psychological Services programme should be equipped to address the needs of all learners with and without special education needs. The implementation of inclusive education as espoused in White Paper 6 is meant to address barriers to learning, including emotional and psychological barriers, to ensure that all learners irrespective of their disabilities have access to School Psychological Services. Specialized education is viewed as a continuum with frameworks within which all learners can achieve their potential in the mainstream. According to Archer, Viljoen, Hannekom and Engelbrecht (1994), sustained support of educators and learners is fundamental to successful mainstreaming. Support in this regard includes empowerment by skills-sharing, curricula development and modification, in-school collaboration and availability for consultation and monitoring of difficult-to-manage problems. The effectiveness of services is contingent upon and impaired by the lack of an organised system of collaboration. As Pillay (2011) put it, the lack of cooperation, collaboration and support can militate against the effectiveness of counsellors and the services they offer. Education is a societal issue and implementing School Psychological Services to attend to an array of learners needs is tantamount to putting their well-being first. The Department of Education, Teachers' Unions (such as SADTU and NAPTOSA) and schools must also make educators aware of the Employee Assistance Programme (EAP) and the services it provides.

In conclusion, the study advocates for the revival of School Psychological Services, with counsellors at the helm. Studies by on suicide (Schlebusch, 2005a), school violence and bullying (Mncube & Harber, 2013; Findling, 2013, O'Moore, 2005; Samara & Smith, 2008), behavioural

and emotional problems (Crespi & Hughes, 2004; Dunbar-Krige et al., 2010), depression and suicide (Perfect & Morris, 2011), the inadequacies of Life Orientation (Rooth, 2005; Naidoo, 2006), substance abuse (Searll, 2002), teenage sexuality and pregnancy (Francis, 2010; Sathipersad & Taylor, 2011; Darroch & Singh, 1999), domestic abuse (Kamner & Eagle, 2010), and School Psychological Services (Carolissen, 2012; DoDea Manual 2946.4, 2001; Gutkin & Conoley, 1990) collectively make a clarion call for the immediate implementation of School Psychological Services to handle these issues at school level. This due to the fact that there is a need for mental health promotion in South African schools (Petersen et al., 2010). Their calls are echoed by Pandor, Mtshali and Cronje, all politicians with a vested interest in the country's education, and this study amplifies the magnitude of the issues. These calls upon the Department of Education to reconsider bringing back professional school counsellors in schools, who would work collaboratively with psychologists based in districts, social workers, nurses and medical doctors to attend to a variety of learners' developmental challenges, health, social and mental issues. According to Schlebusch (2005a), the fact that there are no school counsellors in many schools should be addressed as it has a negative impact on the mental health of learners at risk for suicidal behaviour. Learners' mental and physical wellbeing affects their academic performance. As the California Community College Student Health Program (2014) put it, students with high levels of psychological distress are less academically successful. The slogan of 'education for all' (Department of Education, 1995b) means that socio-economic issues, health issues, physical and mental disabilities should not be allowed to hold back any child from realising his/her potential. The future of every child must hold promise for a brighter future for our beloved country. Social constructivism speaks to the importance of learner-adult interaction in enabling youth to carve their own destinies, whereas the ecosystemic theory interrogates the

roles of the school, family and community in the promotion of learners' mental health. The health promotion framework mandates school to implement programmes that would ensure that all issues which have a potential to affect learners negatively are dealt with at school, so they can focus on the job at hand, which is getting educated.

There are many challenges which impact upon the delivery of School Psychological Services, and most indirectly influence learners' mental well-being and academic performance. School Psychological Services, though based in schools, are a community initiative founded on a 'shared belief' of all participants. It should be national priority for the Ministry of Education and schools to implement Psychological Services to promote learners' well-being, and actively participate in constructing public and educational policies mindful of the sociocultural milieu.

7.3 Theoretical analysis of findings

The research study, which can be characterised as a mixed methods exploratory study, was underscored by social constructivist and interpretivist paradigms, is informed by a concern to understand the world as it is, and focused on multiple participant meanings in order to understand the fundamental nature of the social world at the level of subjective experience (Naicker, 2000). Using the interpretivist paradigm, I was able to understand the experiences of participants regarding School Psychological Services, learners' needs and the challenges they experienced. The analysis of data had to be carried out with the backdrop of two theories, namely, social constructivism and the ecosystemic theory. Social constructivism speaks to the importance of psychological services in the promotion of learners' well-being, and how learners

need to relate to an informed adult (i.e. psychologist, counsellor or educator) as a mediator between the context, beliefs, feelings and behaviour to co-construct meaning (Roeser *et al.*, 1998). The social construction of knowledge involves the construction and transmission of values, information, and ways of understanding through processes of social interaction. As Donald *et al.*, (2002, p. 104) points out, mediation and scaffolding are important tools in the construction of knowledge and enhancement of mental health. Children should not be passive recipients but empowered actors in their own development and learning. The provision of psychological intervention is an example of learning and as Kim (2001) states, meaningful learning occurs when individuals are engaged in social activities. For that reason, Strong (2005) conceptualises of counselling as essentially based on a good relationship, a context where considerable efforts are made to develop adequate understandings, a site where construction and deconstruction of socially developed understandings happens. Understandings are effective or adequate when put to use in social and physical contexts (*ibid*). Social constructivism, like humanistic approaches, is “people responsive, as it relates to human beings in growth-producing ways and is based on the belief that human beings have the capacity to actively and intentionally construct meaning in their lives” (Scholl, McGowan & Hansen, 2012, p. 6). This means that an individual does not construct knowledge or meaning in isolation or in a vacuum, but through being part of a society or community.

The ecosystemic perspective on child development advocates for the availability of psychological services to address the needs of adolescents, who – in the process of physical and emotional development – encounter challenges that often overwhelm their ability to cope and, consequently, affect their academic performance. According to Dawson and Singh-Dhesi (2010,

p. 298), “educational psychology, with its emphasis on working in schools, has traditionally considered the child in a relatively narrow way. A child exists in the contexts of home, school and community (which includes peer relationships and those relationships and activities they are involved in outside the home), and to work effectively and most completely understand and help the child, psychologists need to understand the child or young person in these contexts”. This essentially means that learners’ psychological issues and behavioural problems affect the dynamics of the school as a system, the home, family as well as the community. Their issues affect the balance (homeostasis) in all these social strata. For example, if a learner is traumatised or depressed and is lashing out, a behavioural manifestation of psychological problems, this affects his/her fellow learners, his/her family and the school. In such instances, it is incumbent upon the school as the most capable social system beside the family to act in the learner’s best interests. The school should focus on restoring order and ensuring that learning occurs smoothly without any psycho-social issues affecting it. Hence, School Psychological Services have to be seen to be playing an active role in designing psychological intervention strategies to modify and change learners’ behaviour, e.g., bullying, depression and trauma, ill-discipline, substance abuse etc. According to Gutkin and Conoley (1990) environmental factors play an important role in the development and continuation of children’s psychological and educational problems, and it is essential that intervention include a strong environmental focus. Otherwise it makes little sense to ‘cure’ children of intrapersonal and intrapersonal problems only to return them to the environment that created their problems in the first place.

The school as a microcosm of society should have tools at its disposal to deal with learners’ psycho-social problems. It is for this reason that health promoting schools have to ensure that

they implement the Mental Health Framework so that learners are less stressed and traumatised to learn and perform well academically. Thus, the study can adopt a ‘seed of change’ approach to facilitate a broader understanding about School Psychological Services and how they can enhance learners’ mental health, and at the same time ‘lobby’ the government to reconsider bringing back professional counsellors and psychological services in schools. It is important to acknowledge that School Psychological Services can make the transition from childhood to adulthood less cumbersome, troubling and complicated for many young people. It is my hope that this study will further the awareness of the important issue of School Psychological Services, and that this enhanced awareness will be followed by action. Below are recommendations that all stakeholders who have a vested interest in creating health promoting schools – and dealing with mental health and emotional issues affecting learners’ well-being – can embrace.

7.4 Implications and recommendations for School Psychological Services

This section attempts to address the question: what lessons can be learnt from this study regarding School Psychological Services? Based on what we now know, how do we move forward? How do we address the anomaly? How do we make our schools more learner-friendly, especially for learners with depressing emotional issues or challenges? According to Herman *et al.*, (2004), social scientists’ dominant ideologies in the delivery of psychological services include *professionalism* (preference for interventions delivered by professionals), *individualism* (valuing self-reliance, self-determination, and individual contributions to problems and solutions), and *pragmatism* (seeking the least expensive solutions with the biggest impact) and

social policies that are not consistent with these ideologies are doomed to failure. Based on these ideologies, the following recommendations for School Psychological Services have implications for the Department of Education, principals, educators, learners and parents. A ‘Fresh Approach’ model to the delivery of psychological services will focus on the following features: philosophy, the delivery of services, roles, and training.

7.4.1 Philosophy of Mental Health:

This has to do with the ethos of the school and the orientation of the academic programmes.

7.4.1.1 Reconceptualization of School Psychological Services

This is about change in the approach to school Psychological Services and their implications to issues affecting learners’ mental health. What schools need is a comprehensive, developmental, preventive and whole-school model of Psychological Services. This means that Psychological Services should be all-inclusive in its conception, execution and delivery. As Watkins (1994) puts it, psychological services must be ‘comprehensive in its clientele, developmental in mission and distributed in mode of delivery’.

Education is mainly focused on the cognitive development of children and academic achievements whilst overlooking the aspects which promote the personal and psychological development of learners. Schools are preoccupied with their performance which is measured by results, the percentages of exemptions at the expense of the emotional well-being and social

aspect of individual learners/learners. Bojuwoye (1992) mooted that the real goal of secondary school education is on the psychological domains of self-development, ego maturity, competence, efficacy, moral development and interpersonal conceptual growth. As Bojuwoye (1992) put it, we must have the school curriculum that promotes the development of human and humane learners, which – on top of teaching learners to pass examinations – also promotes their psychological development. Education is a societal issue and the needs of all children should be top of the national priority list. The school curriculum is very much cognitively-oriented at the expense of social or emotional skills/aspects.

7.4.2 Provision of Psychological Services

What aspects of the programme affect the provision or dissemination of School Psychological Services? How can the quality of services delivered be improved upon? There are many aspects of the programme which impacts on its delivery. The following are some of them:-

7.4.2.1 Revival of Psychological Services– including guidance – in high schools

As revealed by the findings of this study, most schools, especially township schools, do not offer a comprehensive package of psychological services, except Life Orientation or lifeskills education. In their current form, as indicated by the results of this study, school psychological services, where implemented, have not been effective. According to Henderson and Milstein (1996), schools are increasingly attacked for not producing more successful learners. School staff respond by pointing out the increase in societal problems including drug use, divorce, crime, and

violence that hamper their effectiveness. They feel a lack of community support, appreciation, and recognition coupled with increased pressure to do “more with less”. Hence, it is of utmost importance that the Psychological Services, especially guidance and counselling, be revived in schools. One of the critical actions of the National Development Plan 2030 is,

“to strengthen youth service programmes and introduce new community-based programmes to offer young people life-skills training and opportunities to participate in community development programmes” (National Planning Commission, 2012).

In order to carry this out, schools should have the necessary resources provided for by the Department of Education. This includes the location of Educational Psychologists in District offices, which should lead to improved service delivery. The training of such personnel should be carried out by tertiary or higher education institutions and the placement of counsellors in schools should be the responsibility of the district office. School psychologists and counsellors mostly fail to fulfil all the activities that are demanded of them timeously and a significant contributor to this issue is the student to counsellor/psychologist ratio. A lower ratio means that more students will receive the help they need on issues affecting them (Australian Psychological Society, 2013). An increase in personnel would enable the schools to provide immediate or timeous emotional support to learners who are in desperate situations – if they choose to talk. These professionals would be there when learners need them, are trustworthy and assures strict confidentiality. There is an urgent need to equip both school counsellors and teachers with appropriate knowledge, skills and techniques that will allow them to act professionally concerning their students’ psychological and educational needs.

Psychological Services must focus on wellness, health, prevention, counselling and building competencies with a concomitant de-emphasis on pathology, deficits and labelling. As Gutkin and Conoley (1990) put it, school psychology must go beyond issues pertaining to assessment and diagnostic technologies and focus more on intervention to maximise its impact. These logistical hurdles can be dealt with once there is commitment from the Department of Education to bring back school counsellors. This means that South African schools need a policy on School Psychological Services with national guidelines (i.e. norms and standards) for both practice and practitioners. For starters, the Model for Comprehensive and Integrated School Psychological Services (2010) can be used as a blueprint to formulate and implement a context-based policy in South African schools.

Learners' mental health and psychosocial problems must be addressed if schools are to function satisfactorily and if students are to learn and perform effectively. Schools must respond to, minimise the impact of, and prevent crises (Adelman & Taylor, 1998). According to Morris (2000) the lack of appropriate support for young people might contribute to their failure to reach their potential. Existing mechanisms for supporting, advising and guiding young people were described as 'patchy', while systems for funding, planning and quality control were said to be complex, inconsistent and confusing.

It is critical that schools consider the mental health needs of learners as part of the whole school setting. Sun and Hui (2007, p. 308) argue that "having support at school is vitally important in fostering adolescent psychological health". Locating mental health services in schools is the best

way to provide services to learners. Schools should have the support system, particularly when the adolescents' family and peer systems are dysfunctional. Otherwise, Sun and Hui (2007, p. 308) warned that “adolescents tend to think about suicide as the way to cope with distress, more especially when they cannot solve their problems directly or obtain emotional support from their significant others”. According to Page *et al.*, (2013), skills training programmes help students develop problem-solving, coping, and cognitive skills that may protect against suicidal feelings and behaviours, and also possibly reduce suicide risk factors (e.g. depression, hopelessness, and drug abuse). Preventive approaches have long-term benefits for the individual and the society at large. Supporting Page *et al.*, (2013)'s observation Hui (2002) indicates that guidance must put more emphasis on prevention than remediation and emphasize the importance of support and team approach in its delivery. The beauty of prevention is that to a certain extent its practice already exists within the school, and school psychology places greater emphasis on prevention programmes, which has led to a shift in thinking from remediation to prevention (Terjesen *et al.*, 2004).

The advertisement for a position of School Psychologist (**Appendix J**) is long overdue, but a welcomed step in the right directing. The main purpose of the research is to form an advocacy campaign to bring back psychologists and counsellors back into our schools. Ultimately each and every school – special, remedial or mixed ability – should have a resident psychologist or school counsellor to attend to the needs of all learners irrespective of their intellectual capacity and their age. KwaZulu-Natal has set the ball rolling as there are psychologists based in district offices although their impact is minimal mainly because they are few, and each of them is expected to service more than ten schools.

7.4.2.2 Decentralisation of School Psychological Services

The basic premise behind decentralized Psychological Services is that psycho-educational decisions made at the local level are faster, more informed, flexible and responsive to specific needs than decisions made in the regional office or head office. To paraphrase an ancient African (i.e. Nigerian) proverb, ‘it takes the village to educate an African child’ (*The village can raise the child better than the state*)

Decentralised Psychological Services would have counsellors based in schools working collaboratively with psychologists and social workers based in the district office. This would make Psychological Services easily accessible to learners. The district office would focus on management issues and the coordination of services. The school, on the other hand, would focus on operational issues, and would enjoy semi-autonomy as the school counsellor would act as director with authority to design a plan of action. This however does not mean that Psychological Services are the domain or preserve of school counsellors. The requirement of decentralised programmes is that other school personnel participate. Educators should recognise that aggressive and disruptive behaviour, failure to meet academic expectations, social rejection, substance abuse and socialisation to antisocial peer groups are clear signs that developmental challenges lie ahead. There should be a committee overseeing the activities of the Psychological Services programme. A psychologist and social worker would only intervene when requested by the school counsellors. As De Jong *et al.*, (1994) state, decentralised autonomy in the governance of the guidance and counselling function will allow for greater community participation in planning and management. As Mamphela Ramphela (2010) puts it, sixteen years after the dawn

of the democracy our societies are still struggling with the gap between vision and reality, and attribute that to the lack of acknowledgement and mobilisation of the inventiveness of ordinary people to tackle developmental challenges. The Department of Education needs to embrace the involvement of citizens in the planning and implementation of programmes for their own development.

7.4.2.3 The assessment of Life Orientation

The assessment of Life Orientation should be less cumbersome and should not focus merely on factual tests and tasks, but should afford learners an opportunity to express their feelings on issues and discuss problems and topical issues such as affirmative action, homosexuality etc. Learners are required to complete projects in order that educators will be satisfied that they have achieved the desired outcomes before progressing to the next grade. Learners' attitude of perceiving Life Orientation as a 'free' period should be stopped. The competency levels, knowledge and skills of LO teachers are factors important to consider. Mbokazi (1999, p. 1) warned that "for Life Orientation to be effective and efficiently offered, the problems that School Guidance has encountered in the past will have to be considered and attended to. Otherwise we would be re-inventing the wheel, as history tends to repeat itself. Despite the lack of empirical support that Life Orientation promotes learners' well-being and helps them handle their problems, there is no evidence that its implementation should be abandoned.

7.4.2.4 Delivery of career education and counselling

According to Akhurst and Mkhize (2000) career education has not been accessible to the majority of people, especially learners in township and rural schools. It is necessary for career education to assume a far more central role in educational settings and other places where learning takes place. A developmental approach to career education dictates that career education should begin in schools and proceed into the workplace, tertiary institutions, other adult education contexts, and into the broader community.

Career education is an important aspect or focus area of the Life Orientation curriculum. It should be offered by school counsellors who have a professional background to assist learners in making informed career and educational decisions. This means that educators need to be adequately trained and informed about careers and their requirements *vis-à-vis* school subjects or learning areas. Due to the fact that the world of work is continuously changing, there is a vast amount of information that Life Orientation educators need to gather to be up-to-date and well informed about. Gibson and Mitchell (1990) cautioned that career education cannot succeed without career guidance and *vice versa*. This means that the success of the career guidance programme is tied to the success of the career education programme, a success that rests largely with the school counsellor. Career counselling, according to Naicker (1994), is not a simple mechanistic process of fitting a square peg into a square hole. It is more a rational process of matching and appraisal of the individual and appropriate occupational information in a career plan. To achieve this, there is a need for career assessment to assist learners to choose careers

that best suit them. This means collecting personal, psychological and social data about each individual learner and analysing it.

Naicker (1994) suggests that a socio-psychological approach to career counselling is relevant as career counselling is meant to help learners to ably participate in decision-making processes, as well as equip them to resist external pressures. Both pre-service training (PRESET) and in-service training (INSET) of educators and counsellors are important in this respect, more especially for counsellors who should be adequately trained as career experts. As discussed earlier, a major obstacle in the adequate provision of career guidance is the downgrading of the role of counsellors by the DoE after 1994. Also, improved cross-sectoral collaboration and involvement of social partners in the development of career guidance policies is important for the effective delivery of career guidance services. This would necessitate networking between schools, tertiary institutions (universities) and the corporate world regarding the training of educators, especially grades eleven and twelve educators. Most universities nationally hold career fairs/exhibitions annually and school counsellors should ensure that learners attend them. Also, the use of the Internet as a source of career information by learners should be explored and encouraged. This enhanced awareness of the challenges in the provision of career guidance should, as I hope, be followed by action.

7.4.2.5 Advocacy campaign on SPS – ‘tell them about it so they know’

One of the factors impacting on the implementation and delivery of Psychological Services is learners’ inability to access mental health services even when the services are available. It is not

uncommon for learners not to know their counsellor and that their school had counselling services. This is mainly due to lack of awareness, fear of consequences (embarrassment & stigma), believing that seeking help is a sign of weakness, or not knowing who to ask for help. Simply knowing that the services exist is insufficient. Young people need to know what the counsellor does, when he/she is in, and how to make an appointment. Psychological Services would be more accessible if there is better promotion of the services - that is - if counsellors provide learners with information about the benefits of Psychological Services, including counselling services. Advocacy removes students' scepticism and cynicism about the benefit of counselling and improves the quantity and quality of publicity among students. Fullan (1993) contends that the ability to manage change is an essential skill in post-modern society. Change is mandatory, growth is optional. On the same issue, Mkhathshwa (1995) cautioned that before bringing about change, it is important to develop an awareness of the need for such. Awareness creation is the best way to prevent misconceptions about the programme and services it provides. According to Kitzrow (2009) it is important to conduct an on-going education, outreach, and advertising campaign to inform learners, parents and the community about mental health issues and encourage them to use the services available to them. Information booklets can also be used.

7.4.2.6 Inter-departmental collaboration

School Psychological Services should be the responsibility of the Department of Education, the Department of Health and the Department of Social services. A close cooperation between these departments will promote the psychological well-being of learners. Strogilos, Lacey, Xanthacou and Kaila (2011) posit that the effectiveness of services is impaired by the lack of an organised

system of collaboration. The sharing of information by participants should be formalised to ensure that they are working towards the same goals for the child. Their tendency of people working around a child to collaborate only when there is a problem is short-sighted, provide poor integrative strategies and create few opportunities for change (*ibid*). This means that psychologists, counsellors and social workers should work collaboratively for the betterment of young people's lives. This would ensure that services are not duplicated and students receive appropriate information about services offered by different providers (Perfect & Morris, 2011). Presently they are operating as separate entities or two separate realities which have very little to do with each other, an unhealthy state of affairs which does not auger well for building a better future for the younger generation. According to Strogilos *et al.*, (2011), for a holistic approach to children's needs, all services should be under one management system, a product of inter-sectoral collaboration. This is very likely to improve the rate at which learners' problems are dealt with and enhance their well-being, and indirectly influence their academic performance. The concept of School Psychological Services should become a shared belief of all participants and schools should provide avenues for sharing ideas and communication.

7.4.2.7 Change in attitudes of participants

The attitudes of policy-makers, learners as well as teachers/educators towards School Psychological Services will have to change. If we remain rigid in our approach to Psychological Services we are less likely to see the potential benefits. The Department of Education see personal counselling as a luxury, non-consequential and which does not need financial resources. These misconceptions affect the delivery of services in the sense that the government would

acknowledge the importance of the services but fail to afford schools the financial muscle to implement the programme. Educators see Psychological Services, particularly guidance and counselling, as a waste of time and are accustomed to using its periods to catch up or as free periods. The services should be afforded an equal status to other subjects (learning areas) like science and mathematics. Learners – especially blacks – regard it as a European or Western invention meant for weaklings (*whimps*) who just do not want to face the challenges of growing up alone.

7.4.2.8 Psychological Services to be a direct service

The practice of School Psychological Service is mainly an indirect service which relies on third parties (i.e. parents and teachers) to deliver the services. This in a way dilutes the effective implementation of the recommendations of psychologists in the sense that they do not act on these in appropriate ways. In this case the recommendations will have little impact on the children referred for Psychological Services. The current state of affairs frustrates the efforts of psychologists who recognise their limited influence with third party adults, most of whom are not passive recipients of psychologists' recommendations for intervention. They do not follow through with the recommendations because they feel they know better (Gutkin & Conoley, 1990). Making school psychology a direct service – as depicted by the flowchart (*Appendix K*) will address this dilemma. School psychologists should not spend 90% of their time on indirect services as if their profession is an indirect service delivery profession. Psychologists would collaborate with teachers and parents to implement their recommendations but would be able to monitor the situation themselves, a mammoth challenge but one that can be handled with a lot of

patience and time. However, the placement of psychologists in District offices does not seem to address the dire needs of learners and educators mainly because of staff shortage. We cannot expect a single psychologist to serve the whole of Umlazi Township with about 80 high schools and 100 primary schools. In an ideal situation the manageable counsellor-learners ratio should either be 1:300 or 1:500 (Daniels, 2013)

7.4.2.9 The cascade model of skills distribution

According to Lazarus and Donald (1995), cost-effectiveness is a necessary and fundamental principle in the formulation of any policy proposal but particularly where present and anticipated future fiscal constraints are severe and are driven by real competition for resources in the reconstruction of the whole imbalance of South African society, let alone of its education system. Hence the use of the cascade model through which consultation, training and support is continuously used to empower personnel at lower levels of skill with greater competence and effectiveness (Lazarus & Donald, 1995; Ntombela, 2006). This would ensure that scarce and expensive expertise is made accessible to all and would simultaneously ensure the improved and unlimited access of learners to School Psychological Services. School psychologists and counsellors should be the leading mental health experts in schools who are knowledgeable about development in social, affective, and adaptive domains, and supervised experience is needed to make someone a skilled practitioner (Perfect & Morris, 2011). The idea of ‘training the trainers’ as espoused by Perfect and Morris (2011), Petersen *et al.*, (2009) and Mannah (2002) where mental health service work is undertaken by general and lay workers with basic skills, seems as the best solution to capacity challenges in the provision of School psychological Services. This,

undoubtedly, would ensure that the programme achieves maximum impact by improving the availability, accessibility and affordability of mental health services for learners.

7.4.2.10 Curriculum infusion

The achievement of the goals of any educational system inevitably depend on the quality of its curriculum. Since all of health, social, psychological, academic and career development are universally viewed as constitutive of the aims of education, an education support service and its contribution to the optimal development of all children and youth cannot be separate from, and a mere adjunct to, the general curriculum (Lazarus & Donald, 1995). Curriculum infusion emphasise that health promotion and developmental aspects of education support services should be integral to every level of the general curriculum and its development. The school curriculum should address the needs or problems of learners, including special needs, and as Julius Nyerere (Swartz & Foley, 1996) commenting on education said “in university promoted research, and in the content of syllabuses, the needs of our country should be the determining factor”. What is needed is to rethink the relevance of what we expect our learners to learn, whether or not it satisfies their needs and how in the end our communities would benefit.

7.4.2.11 Deconstruction of Psychological Services

Concerning deconstruction of Psychological Services, it is important to investigate attempting if black learners (learners of African-descent) really need Psychological Services. There is an overarching perception that Guidance and Counselling is an imported colonial concept

dominated by western epistemological frameworks that has little relevance to the South African context, particularly African communities. This perception can stir a lot of debate as there are Africans who claim that it was part and parcel of their traditional upbringing. Nevertheless, the question remains: Is there a black African *modus operandi* to Guidance and Counselling? Although Westernization has diluted traditional African cultures, there are certain cultural or religious values that have managed to be retained, for example, principles underlying male circumcision and female virginity testing and how it contributes to youth development. It is fact that approximately less than 40% of high school graduates actually make it to tertiary educational institutions (Mediaclubsouthafrica, 2010). But there are students who – in spite of their limited exposure to Psychological Services (i.e. Guidance and Counselling services) in their schools – managed to do well academically (for example, passed matric). Some even got admitted into the faculties of Medicine and Engineering.

Perhaps, we should seek to find out if there is an African (that is, black South African) way to practice Guidance and Counselling, entrenched in the African philosophy. Perhaps the time is opportune for researchers to unpack or debunk the whole psychological practice and investigate its relevance in the African way of life.

7.4.3 Stakeholders' Roles:

The section is about the different roles played by stakeholders in the delivery of School Psychological Services, namely politicians, educators, parents and learners.

7.4.3.1 Mopping up work by the Department of education: ‘visible policing’

The Department of Education should attempt – at school level – to counteract the effects of the rot in our communities due to socio-economic forces such as poverty, unemployment, and crime. In order to achieve this, there is a need for counsellors to be visible and effectively participate in directing the youth and redirecting their energies into worthwhile and productive activities. Learners can no longer be left to suffer in silence. The academic aspect of learners should be complemented by a programme of services meant to nourish other aspects of human development, namely the emotional and social aspects. The DoE can play a leadership role of hiring qualified counsellors and at the same time get rid (firing) of ‘dead wood’, ineffective and incompetent counsellors failing to live up to the departmental mandate of providing good quality Psychological Services to learners. There is an urgent need for competent, effective and efficient provision of psychological services.

7.4.3.2 Parental involvement in SPS

According to Bronfenbrenner (Christenson & Buerkle, 1999, p. 709), “using a chemical analogy, parent intervention functions as a kind of fixative, which stabilises effects produced by other processes”. This demonstrates the importance of school personnel working with families as partners. The act of enhancing connections between communities and the institutions that affect them results in better outcomes for children and their families. Involvement can either mean greater participation in the life of a school or increased contributions to an individual child’s learning. Parental involvement occurs when parents actively, critically, resourcefully and

responsibly contribute to promoting and developing the well-being of their communities (FamilyStrengtheningPolicyCenter, 2004). When schools build partnerships with families that respond to their concerns, honour their contributions and share power, they are sustaining connections that are aimed at improving student achievement. This would serve as acknowledgement or validation of the notion that a secure base or safe relationship provides the confidence necessary for teenagers to explore their emerging identities and develop as autonomous individuals. As Bostik and Everall (2007) put it, the presence of one validating relationship can serve as a catalyst for the development of additional meaningful relationships, can decrease an adolescent's fear of rejection, and facilitate increased risk taking necessary to establish new relationships and a reliable support system. Counsellors would only collaborate with parents because they care. According to the Michigan Department of Education (2002), family participation in education was twice as predictive of students' academic success as family socio-economic status. When parents and educators work together, students have higher grades, better school attendance and fewer instances of violent behaviour.

Schools must engage with parents, through workshops and community outreach programmes, on the way in which social and interpersonal problems might be prevented. They must discuss with parents and community representatives ways in which they might engage and deal with social problems that are manifesting in the school and the community. Engagements with parents would also mean drawing upon existing and available community resources (Donald *et al.*, 2002). Schools should administer family relationships enrichment programmes for parents to equip them with effective communication and conflict-resolution skills. The building of a strong school-community relationship is realised by maximum participation of parents, volunteers,

traditional healers, community organisations and religious groupings in the education support services programme.

The partnership between parents and educators should include involvement in planning, development, implementation and monitoring of education and support and should train parents to develop their capacity to participate in their children's education. The effects of socio-economic problems and their impact on learners' mental health can be minimised by a Psychological Services programme which involves parents. But as Maphanga (2006) pointed out, parents' high rate of unemployment, their low educational attainment, and educators' apprehension about working with parents are reasons for the low rate of parental involvement. Schools should create a welcoming environment for parents and accommodate the schedules of the working ones, and their varying cultural backgrounds. Schools which continue to operate as if they were islands do so to their own detriment and their chances of success in shaping young minds are very slim. Bonnie McReynolds (2008) sums it up succinctly when she says that "parent involvement will probably make more difference than anything else we could ever do to help our children learn" (2008, p. 01). This was corroborated by Gregory Ramey (Sunday Times, September 20, 2009, p. 5) who – amongst other things – stressed the importance of sending happy children to school thus, "*children and teenagers need a foundation of emotional stability. It is hard to focus on school if you are worrying about your parents' alcohol problems, emotional or physical absence, or constant arguing. Staying in a turbulent and destructive relationship for the sake of the family rarely works out. Create the type of home you would like to live in and you will see a big impact on your children*" (Sunday Times Review, September 20, 2009: 5).

According to Mashau *et al.*, (2008), a caring and guiding relationship with parents and educators can pre-empt and/or alleviate stress in the child/learner, and well-attached children start life positively, they have more self-confidence, and are socially more competent, better motivated, and more open to others' feelings. Many learners attributed their academic achievements to having supportive parents (e.g. "pillar of strength") than having concerned and caring school counsellors (Naicker, 1994; Maphanga, 2006; White, 2004). This view is supported by Hill and Tyson (2009) when they said that without effective parental involvement adolescents' opportunities are often foreclosed, leading to lost potential, unrealised talent, diminished educational and vocational attainment, and widening demographic gaps in achievement. According to Christenson and Buerkle (1999, p. 716), "policies that deal with family resources, welfare dependency, and poverty among children are also educational policies to the extent that they make the home a better school". Hence, partnerships to support children's development are seen as vital to the optimal socialization of children and youth. It is for that reason that Christenson and Buerkle (1999) describes the home and the school are seen as overlapping spheres of influence.

7.4.3.3 Partnership between the Department of Education and the private sector

As in dealing with all socio-economic concerns, partnerships between government departments and the private sector are essential for effective service delivery. Schools' failure to deliver the best services is largely attributed to lack of resources or inadequate resources. Undoubtedly the partnership between the Department of Education and the private sector will offer schools

resources necessary for the implementation of Psychological Services. Mkhathswa (1995) maintains that for any guidance programme in our schools to succeed it must have the unqualified backing and support of the Department of Education, the inspectorate, school governing bodies, the school principals and the entire staff. The successful implementation of any programme in schools is dependent on the quality of DoE support. By employing social workers and Psychologists to work with schools, the DoE can ensure that services are available for learners in all schools. But, the Department of Education should have mechanisms in place to monitor their activities and conduct impact assessments regularly.

7.4.3.4 The importance of teamwork

The delivery of Psychological Services should not be at the mercy of a few trained professionals but should be a whole-school approach. Schools need an integrated system of services which involves all teachers and all learners. A whole-school programme of services must involve all stakeholders and must take account of the problems which some learners experience, especially those from disadvantaged backgrounds. According to Rooth (2005) all teachers needed to identify learners with problems and offer assistance, with guidance '*formally endorsed as the responsibility of all teachers*', with emphasis on the prevention of problem behaviour. The provision of Psychological Services should be the product of collaboration between educators and learners with firm support from the School Management Team (SMT) and the School Governing Body (SGB). According to Reiner, Colbert and Perusse (2009) teachers have a vital role as members of the counselling team and a successful counselling programme could not be

implemented without their support, hence communication and collaboration between school counsellors and teachers were the most important tasks for school counsellors.

7.4.3.5 Avoidance of dual roles of school counsellors

According to Makhoba (1999) and Mbokazi (1999), one of the main reasons why guidance educators in most schools were unable to perform their duties optimally was that they were expected to offer other subjects besides guidance. In order to maintain the integrity of professional relationships, it is important that school psychologists and counsellors should not serve dual roles as that presents a conflict of interests. A counsellor serving both as a subject educator and a counsellor will have a difficulty in maintaining a professional relationship with his clientele and the practice is a violation of professional ethics. According to the Australian Psychological Society (2013), the role of teachers and counsellor/psychologist are intrinsically separate and ethical dilemmas involving dual professions and multiple relationships are likely to occur when combining them. Dual role causes confusion due to the differences between the roles and the boundaries within the relationship of counsellor/client and teacher/learner. One of the concerns raised by learners was that they needed educators to listen to them but they also recognised that their educators were limited in the time they could devote to this kind of support.

7.4.3.6 Separation of roles

Schools should commit to never allowing educators to talk about “learning disorders” unless the child in question has been professionally diagnosed by a medical doctor specialising in learning

disorders or a psychologist (Donaldson, 2002). The experience of working with children with learning disabilities does not give teachers the right to play ‘doctor’, and attach ‘diagnostic’ labels that may be more damaging to children’s self-esteem and would confine them in a therapist’s chair. Teachers should just know their place, and concomitantly accept that diagnosing is not their forte’. Labelling and stigmatizing learners tend to leave deep emotional scars which are difficult to undo.

7.4.3.7 Teaching versus life-coaching

The conception of teaching and learning, as Sharratt (1995) notes, promoted in most South African schools and endorsed by parents is too narrowly limited to purely academic instruction. According to Sharratt (1995, p. 214), “effective teaching involves knowledge and training that goes beyond the basic subject matters to include an understanding of how people attend, comprehend, construct meaning, transfer what they know, solve problems, and get motivated to excel”. Teaching and learning should be about equipping young people – not only to excel academically – but be competent to handle the challenges they encounter in their lives. Education does not begin or end in the classroom; it is life and transcends schoolhouse walls.

7.4.3.8 Learner participation in decision-making

The programme should be inclusive as “pupils have the capacity to make meaningful judgements about their schooling and will respond in a responsible and constructive manner when they are involved in a serious way” (Howieson & Semple, 2000, p. 383). A programme which is imposed

on young minds fully aware and conversant with their own rights is very unlikely to yield results. Learners should not be seen as objects but as agents of their own emancipation. Involving learners will make them feel ownership of the programme and would 'buy into' it. Learners need to be empowered by involving them in both negotiating the structure and content of the programme and reviewing the programme annually. Their feedback is essential when planning for the future as it gives policy makers an impression of how effective or ineffective the programme has been and necessary adjustments to be made. Counselling services must be made more accessible and acceptable. Listening to young people ensures that most of them seek help when they need it.

7.4.4 Training of personnel

Educator development is important for the delivery of Psychological Services and impacts on the quality or standard of services rendered. The training of mental health professionals such as school counsellors, social workers and school or educational psychologists is important for the provision of services. As Perfect and Morris (2011, p. 1060) put it, "the profession cannot claim competencies that it does not possess without further training and education if it wishes to be recognised as a provider of mental health services". Emphasising this, Yves O'Moore, (2005, p. 11) aptly says "*when planning for a year plant corn, when planning for a decade plant trees, and when planning for life, train and educate people*". Training, whether pre-service or in-service, is meant to improve competency. Questions to ask would be: Of what relevance is educator development to the needs of learners? How does educator or school counsellor training influence the quality of services?

7.4.4.1 Life Orientation educator as specialist

One of the challenges around the implementation of Life Orientation in schools is lack of capacity. The implementation of School Psychological Services should begin with the intensive and extensive training of LO educators. Life Orientation should become both a specialist subject and an examinable school subject, the rating of which would be considered in tertiary institutions including colleges. This will minimise its marginalization and will ensure that learners take it seriously like other subjects. Due to the psychosocial nature of Life Orientation, educators should have a solid foundation in psychology – especially developmental psychology – either before they undergo training or during their training. This can improve their professional impact on the lives of learners. The training – both pre-service and in-service – of Life Orientation educators should also include equipping them with counselling skills. Though they would be serving as lay counsellors, their collaboration with school counsellors will ease their case-load. Higher education institutions should also consider offering an Advanced Certificate in Education (ACE) in Life Orientation or a Further Diploma in Education (FDE) specializing in Life Orientation. There is need for programmes that would support educators in developing self-efficacy skills to help and support learners dealing with socio-economic issues impacting on their well-being. If LO is to serve as an effective replacement for guidance and counselling, it should be offered by educators whose competence can be proven.

7.4.4.2 School counsellors as professionals

Gibson and Mitchell (1990, p. 46) define a profession as “an occupation in which the members of a corporate group assure minimum competence for entry into the occupation by setting and enforcing standards for selection, training and licensure or certification”. Professional school counsellors are an essential cog in the delivery of Psychological Services. Regarding the need for specialist qualifications, Makhoba (1999) argues that if educators have to be specially trained to teach any particular subjects, so should they be specifically trained to teach guidance. According to Levers (2006), the academic training of school counsellors should equip them with culturally relevant models of counselling and related educational and programme-design interventions need to be included in the pre-service training of African (black) counsellors. Preparatory training needs to include an emphasis on contemporary problems in Africa, and problem analysis needs to be linked to afro-centric models of problem-solving. Adegoke and Culbreth (2000) suggest that a comprehensive counsellor training programme must take into account the socio-political and cultural context of the people for whom the programme is being developed by modifying the basically euro-centric counsellor education programme to fit into the cultural environment of the people. Learners need to understand the psychology of indigenous ways of knowing and be encouraged to construct intervention models that address the needs of most African learners in culturally meaningful ways. Knowledge of indigenous culture and culture-bound models of helping is essential in counsellor training and for accreditation purposes. Both INSET (in-service training) and PRESET (pre-service training) would assist in the implementation of Psychological Services since they would ensure that there are competent personnel to offer the services. These

can be done through the presentation of short courses, workshops, conferences, congresses, study groups, inter-school visits, lectures and staff-development programmes.

Trained school counsellors should work collaboratively with the District Psychologists and should invite the latter when there is a need. Making referrals, in my experience, seldom addresses learners' problems; it is tantamount to 'passing the buck', placing the responsibility in another person's hands and often make learners or clients feel insignificant.

7.4.4.3 Parent skills training workshops

It is Kauffman's (1997) proposition that prolonged deprivation of the young child of maternal care may have grave and far-reaching effects on his/her character, which created a storm of controversy. His conclusion was that early life experiences may have serious and lasting effects on development, which is now generally accepted as true. Consequently, there is evidence of an association between delinquency and broken homes. According to Kauffman (1997), a child's problems may find expression in the classroom, but in most cases effective management involves both the child and the family. Schools, through a programme of Psychological Services, should facilitate workshops on parenting skills, developing and enhancing a parent-child relationship founded on love and trust, the importance of parental involvement, communication skills, sex and sexuality, learner discipline especially and how parents can discipline children with love, etc. Many of the emotional difficulties adolescents experience have their beginnings outside school, hence it is important for schools and families to collaborate because parents and families can be

an important resource. Workshops and regular meetings would enable schools to achieve the goal of establishing an effective School Psychological Service programme.

7.4.5 Resources for the provision of SPS including policies

According to Donald *et al.*, (2002) a school with inadequate resources – too few classrooms, poor teaching, high teacher-learner ratios, and inadequately qualified teachers – will struggle to help its students achieve. It follows that resources (i.e. physical, political and financial) have a huge impact on the quality and quantity of Psychological Services delivered by the programme.

7.4.5.1 Recognition of school counsellors as practitioners

The implementation of School Psychological Services (SPS) hinges on and should be preceded by the recognition of school counsellors as mental health practitioners who have specialised training in both psychology and education. The school counsellor would work closely with educators, social workers, psychologists, medical practitioners, parents and other interested parties to create safe, healthy and supportive learning environments for all learners. For this to happen the Department of Education must invest in the training of counsellors who should upon completion of their studies possess sufficient knowledge and skills to design intervention programmes and assist educators with the teaching of Life Orientation, especially with career guidance, sex education and life skills education. This means that it is pertinent for each school to have a counsellor as initiator and designer of school-based psychological support. As Young (2009) argues, they need to be fully competent in psycho-educational evaluation and assessment

interventions which would optimise educational services to students. Such a counsellor, having completed intensive training, must be registered with the Health Professions Council of South Africa (HPCSA). The counsellor's responsibilities shall include conducting individual counselling sessions, assisting learners with academic and career planning, developing counselling goals and activities based on needs assessments, assist learners with personal/social development, interpret learner records and assist the school principal with identifying and resolving learner issues, needs, and problems. The 'Model for Comprehensive and Integrated School Psychological Services' (2010) developed by the National Association of School Psychologists (NASP) can be used as a blueprint that informs the implementation of School Psychological Services in South African schools.

7.4.5.2 Life Orientation curriculum analysis

Since its inception the Life Orientation curriculum has not been appraised and its effects on learners determined. The FET curriculum – which includes Life Orientation – needs unpacking/appraising and its impact on learners' attitudes properly analysed. As Jacobs and Gawe (1998) note, a successful curriculum has to be derived from a clear understanding of contextual factors. Studies on the effectiveness of the Life Orientation curriculum have questioned its impact on the attitudes and behaviours of learners due to the fact that there is an increase in the HIV and AIDS infection rate amongst the youth, there is an increase in incidents of violence in schools, an escalation in the cases of substance abuse by learners, and an increase in the drop-out rate of matric learners. According to the National Strategy for HIV and AIDS, Life Orientation is ineffective to combat teenage pregnancy and the spread of HIV and AIDS,

and also does not set guidelines on how to tackle problems (Mannah, 2002; Sowetan, March 5, 2007, p. 5). Also, with the escalation of the HIV and AIDS infection rate among learners, LO does not address their need for psychological intervention (Marneweck *et al.*, 2008). Its failure may be caused by many variables, including the under-preparedness of educators for its implementation, the lack of skilled educators, confusion about its purpose and the fact that Life Orientation is a non-examinable subject. Curriculum re-orientation means that there is need for a new focus driven by renewed energy to address the effects of social ills ravaging our communities. Such a curriculum would turn our schools and classrooms into compassionate and caring mini communities, and learners would feel and behave more like members of the human race. In this way, the drugs, abuse and killing in our school yards would become part of our dirty history.

Mamphela Ramphela sums up the above sentiments when she said that

“the reason why inequality is growing is that we have not done a good job at transforming the education sector. We had to transform the education sector, we had neglected the basics. Another denial is that somehow we expect the same teachers produced by Bantu education to, miraculously, be able to do all the things that Bantu education stopped them from doing”

(Sowetan, September 26, 2007, p. 21).

In another article (*Sunday Times*, January 18, 2009, p.19) Mamphela Ramphela said “our education system is socially engineering the continuation of inequalities that leave the majority of black poor children behind” The point she is making is that there are still many inequalities in our education system, created especially by the lack of provision of resources including School Psychological Services. True and meaningful transformation has to restore parity; this means that

schools – urban and rural – should be equally resourced for all to enjoy the fruits of our democracy. Transformation is rooted in the idea of the relationship between education and qualitative change and includes the notion that education ‘adds value’ to the student and is focused on empowerment. Equality will be established by the distribution of resources and equity has to do with the provision of good quality education. South Africa cannot continue to be a country of two worlds, one White and rich with well-resourced schools, the other Black and poor with schools that are under-resourced.

7.4.5.3 Residential treatment facilities (Wellness Centres)

In South Africa, there is a huge need for residential treatment centres or wellness centres for many troubled and vulnerable teens, the so-called youth-at-risk, some of whom end up homeless and living in the urban streets. These includes learners who present serious psychological and behavioural problems like depression, trauma and suicide, drug addicts and victims of physical, emotional and sexual abuse. Some of these are orphans living in orphanages or shelters recommended by social workers and funded by the Department of Social Services, who would benefit greatly from a residential treatment programme providing unlimited access to psychological services. Such a venture, a feasible alternative to the provision of psychological services in schools, would need the departments of education, health, social services and correctional services to collaborate. Staff at these centres would include social workers, psychologists, volunteer medical doctors, nurses, spiritual leaders, life coaches and sometimes, legal experts. Educators would identify at-risk behaviours, which are activities in which youth engage that increase the likelihood of adverse psychological, social, and health consequences

(Kazdin, 1993), and refer them for placement in residential programmes. Life skills programmes offered in these centres would focus on averting and minimising maladjustment and clinical dysfunction in adolescents, by improving prosocial competence and reducing at-risk behaviour. Such a programme would eliminate desperation, restore hope and give learners mental tools to persevere and stay in school. A resilient spirit is what would make at-risk learners realise that they are capable of ‘carving their own destinies’ and not let their circumstances, such as poverty, determine their future. Poverty does not block a child’s mind and dreams can be turned into an ambition.

7.4.5.4 Physical and fiscal resources including libraries

The issue of space is an important one since it affects the quality of the Psychological Services. Fox and Butler (2007, p. 98) posited that “the counselling relationship was critical in encouraging young people to make greater use of counselling but perceived the key elements of the counselling service as it being in a discrete but accessible location, and the service being flexible and informal”. Schools need a private location (a room set aside where special time is allocated to learners to have one-to-one consultations) to provide professional services to learners; a sound-proof room which is accessible to all learners; all current psychological and educational testing materials required to fulfil the professional role as per individual job description. For example, learning in mud structures can have a demoralising effect on learners. When children feel unwanted, their performance would show. Also, fiscal constraints have an impact on the delivery of Psychological Services. Limited resources also feature when the school counsellor renders services as a freelancer who is only in a school one or two days a week (as it

was the case in school D, Table 5.14). According to Gladding (2000) full-time counsellors are to be preferred to part-time counsellors as this would ensure that learners have unlimited access to Psychological Services. Policies are also needed on bullying, harassment, drug abuse, and anti-discrimination with regard to disabilities, HIV and AIDS and pregnancy (Colby, Witt & Associates, 2000). The delivery of psychological services also hinges on the availability of library services. Libraries are powerhouses of information and information breeds knowledge, which has a positive impact on student achievement. Access to information is necessary for the delivery of psychological services as the provision of accurate information is a *sine qua non* for making informed choices about an education programme, an occupation or a social activity. As Sidley (Sunday Times, November 14, 2010, p. 5) put it, “freedom of information is not enough without access to information”. The implementation of a School Psychological Services programme requires that resources (human, fiscal and physical) be built to optimal capacity.

7.4.5.5 Learners’ records

Progress reports and treatment plans for learners with problems have to be kept in learners’ records. Treatment refers to those methods that are designed to remediate established cases of disorder, to reduce their duration, and to reduce their effects on others, thereby reducing their prevalence in the community (Meyers & Nastasi, 1999). Arrangements should be made for full and detailed psychological records to be maintained separately from their educational records. This is because they contain confidential information. Access to these records has to be kept under strict control and permission sought from the school administration well in advance. The school counsellor should be responsible for the safe-keeping of students’ psychological reports.

7.4.5.6 Effective schools

Furlong and Morrison (2000, p. 75) describe the school as “an organisation that impacts student outcomes, and added that effective schools have clearly defined goals in relation to the school mission and philosophy, close monitoring and feedback in regard to progress toward these goals, high expectations for student achievement and clear boundaries for acceptable behaviour, high morale among staff and students, and boast of successful and meaningful involvement of parents and the community”.

An effective school is focused on the holistic development of its learners and the effective dissemination of Psychological Services is an important part of the equation. A school cannot be effective if its learners are forced to face their difficulties alone with no emotional support from health professionals (i.e. psychologists, counsellors and social workers) and educators. This means that an effective school cannot afford not to be affective – that is, demonstrate that it cares about the emotional development of its learners by providing them with emotional nourishment. In the event of learners presenting with serious emotional disturbances, Fein (2011) recommends residential placement facilities which would provide learners with individual and group counselling, as well as round the clock care and supervision. These facilities, according to Fein (2011), foster the physical, emotional and educational well-being of children and create a safe environment and since they will be surrounded by peers facing similar issues, they are very likely to work toward self-improvement. However, research studies have cautioned that knowledge and resources are insufficient, as meaningful change requires leadership.

7.4.5.7 Safe schools campaign

School environments have constantly been plagued with violence creating unsafe environments for learner development and academic progress. This also affects educator morale. According to Burton and Leoschut (2013), it can cause psychological, emotional and/or physical damage on its victims, resulting in a decrease in educational performance. The school as a physical, educational, and social environment has to embrace violence as an educational problem and allow it to become a topic worthy of classroom and school attention. According to Furlong and Morrison (2000) school violence is an important component of children's daily lives, affecting where they walk, how they dress, where they go and who their friends are. High school can be a social minefield with every day being considered a judgement day. As long as teachers treat violence at arms' length, as something that is someone else's problem they will continue to neglect the opportunity to intervene in a crucial aspect of the children's lives. Children see the teachers walking by, pretending not to notice, and they learn that the way we treat others, the way we interact on the street or in the playground, is nobody's business but our own. Teachers must talk about violence, they must recognise it, examine it, dissect it, and let children see and understand its secrets and its sources. Without this examination it remains an ugly secret that society cannot understand or control.

The premise and argument presented here is that safe and secure school environments makes for better emotional development of learners and better academic performance. Evidently, a programme of Psychological Services should be able address learners' need for safety and security, provide them with mental tools to settle squabbles without resorting to violence,

conduct anger management classes, and counsel learners who battle to control their emotions. However, as O'Moore (2005) points out, due to the complexity and multi-faceted nature of bullying and violence individual efforts from schools alone will not be sufficient to counteract these negative forces. Instead a commitment will be required of government and stakeholders at all levels of decision making. Apart from making violence bullying prevention a community endeavour, a 'one-size-fits-all approach' to prevention that disregards contextual factors would not work.

Samara and Smith (2008) says that for schools to show that they take the issue of violence seriously they need to design and implement intervention strategies. It is therefore important that schools develop and implement an anti-bullying policy, which – amongst other things – will include assertiveness training, counselling and peer support. These skills will not only help children learn, but also help to make the whole school a more caring, positive place.

7.4.5.8 School Nutrition Programme

The right to education is an inalienable social right enshrined in the Bill of Rights contained in the South African constitution and it is impinged upon when hunger and malnutrition limits learners' access to education. Given the high prevalence of poverty in communities across South Africa, learners' well-being and the learning process in schools are negatively influenced by factors such as hunger and malnutrition. It was against this background that the democratic government introduced and implemented the Primary School Nutrition Programme (PSNP), which was later renamed National School Nutrition Programme (NSNP). It was meant to address

imbalances and inequalities created by the apartheid policies of the previous government and in turn level the playing field for the poor in terms of access to education. According to McCoy (1997, p. 1), “given the poor state of nutrition amongst children in South Africa, and given the negative impact that malnutrition has on education and learning, the PSNP was a programme worth supporting”. Many learners come from poor families and most experience short-term or temporary hunger. Del Rosso (1999, p. 5) maintains that “nutritional and health status are powerful influences on a child’s learning and how well a child performs at school, and children who lack certain nutrients in their diet (particularly iron and iodine) or who suffer from a protein deficiency, hunger, parasitic infections and diseases do not have the same potential for learning as their healthy and well-nourished counterparts”. The School Nutrition Programme fosters better quality education by enhancing children’s active learning capacity; alleviating hunger; providing an incentive for children to attend school regularly and punctually; and addressing some micro-nutrient deficiencies. Children can be helped perform better in school by simply alleviating hunger. The feeding programme is not only credited with helping maintain high enrolments and attendance but also encourages community participation in education.

The School Nutrition Programme can contribute to the improvement of learner well-being and education by enhancing their learning capacity, school attendance and punctuality and general health by alleviating hunger. Implementing such programmes in schools would benefit many communities. The programme should be extended to secondary schools in communities where such a need exists.

7.5 Significance of the study

The purpose of the study is to explore participants' experiences of School Psychological Services and make inferences as to the state they are at in schools. The study offers important findings to the field in an under-examined area locally, i.e., School Psychological Services (SPS). It contributes to knowledge/epistemology in the sense that it confirms the indispensability of SPS in teaching and learning, both inside the classroom and outside. The study highlights the gap between rhetoric and practice as it posits the importance of SPS in addressing learners' challenges impacting on their well-being and academic performance. One of the core mandates of the guidance curriculum was the provision of effective guidance and counselling at all levels in schools (DoE, 1995a) but with the introduction of Life Orientation that function was moved to the fringes or periphery. Amongst other things, the study highlights the inadequacies of the Life Orientation curriculum, vis-à-vis, the provision of counselling services which is the 'heart and soul' of School Psychological Services (Chuenyane, 1990). According to CDC (2009), Gladding (2000), psychological services promote learners' well-being, by helping those in distress (Kitzrow, 2009), those who need help with career choices (Akhurst & Mkhize, 2009), victims of violence (Greene, 2008; Furlong & Morrison, 2000), including bullying (Smith *et al.*, 2004), depressed learners (Schlebusch, 1990) and those whose problems are so serious that they contemplated suicide (Sun & Hui, 2007; Ruddell & Curwen, 2002; Page *et al.*, 2013).

Importantly, the study reveals a disjuncture or lack of coherence between policy pronouncements (e.g. RNCS, IE and CAPS) and the delivery of School Psychological Services. As gleaned from the study, school-based intervention strategies such as guidance (Mbuyazi, 2002), counselling

(Gladding 2000; Gibson & Mitchell, 2003), Life Skills education (Van Deventer, 2008; Rooth, 2003), career guidance (Akhurst & Mkhize, 2006; Stead & Watson, 2006a; Donald *et al.*, 2000) can help learners cope with their problems, challenges or distractions, but they are not. According to Ahtola and Niemi (2013), the psycho-social well-being of children is important and School Psychological Services (SPS) are mandatory in preschool and basic education. Kitzrow (2009) succinctly expresses that mental health problems may have a negative impact on academic performance, retention, and graduation rates, and further indicates that high levels of psychological distress among college students were significantly related to academic performance. Students with higher levels of psychological distress were characterised by higher test anxiety, lower academic self-efficacy, and less effective time management and use of study resources. However, when students receive help for their psychological problems, counselling can have a positive impact on personal well-being, academic success, and retention. Formal education tends to focus mainly on finishing the syllabus and producing good matric results at the expense of attending to learners' emotional needs. The education systems of three countries, namely USA, Nigeria and Botswana have implemented psychological services with counsellors as the main role players. Though there are unique logistical challenges in each, the South African education system can implement such a programme.

The findings of this research shows that the two (i.e. academic performance and well-being) are complementary (linked) and mutually reinforcing to an extent that the one influences the other (Thuneberg, 2007; Voitekane *et al.*, 2006; Quinn & Duckworth, 2005; Mbokazi, 1999). Most prominently, the study highlights the need for school and community-based initiatives to address social maladies such as substance abuse, violence and bullying, teenage pregnancy, truancy and

ill-discipline. Whereas the ecosystemic perspective draws attention to causes of learners' problems, the constructivist ideology interrogates the impact of problems on learners' well-being and cognitive functioning, and psychological theories (turmoil theory) suggest intervention strategies to ameliorate the dis-ease or psychological discomfort. This means that Psychological Services have an important role to play in the education of our children. This means that all learners should have unlimited access to Psychological Services and that there is need for specialist (i.e. mental health practitioner) intervention in cases where learners have serious emotional problems. In this regard both in-service and pre-service training of educators can make them '*wise before the event*' and ameliorate the situation by imbuing them with skills needed to design intervention strategies. The overall impression of the study is that it creates awareness of the social issues impacting on learners which necessitates School Psychological Services and simultaneously creates dialogue. Apart from identifying the various factors (variables) which affect learners, the study shed some light into the perceived relationship between learners' well-being and their academic performance. Significantly, the study proposes a major change in how school psychology is conceptualised and implemented, which implies making substantial adjustments in our professional training and preparation. A child exists in the contexts of home, school and community and for mental health professionals to understand and help children they must understand them in these contexts.

Since the marginalisation of school guidance and the recent curriculum transformation which led to its absorption in altered configurations into Life Orientation, psychological services continues to occupy the fringes of mainstream education. The significance of this study lies in the use of different theoretical frameworks to understand the experiences of principals, school counsellors,

educators and learners of school psychological services, their impact on education, vital resources and the challenges around their implementation. Although there is sufficient research of school guidance, life orientation (including CAPS) and inclusive education, there is scarce research on participants' experiences of school psychological services. This study is, therefore, ground-breaking in that it examines, from participants' perspectives, the need for School Psychological Services, how they meet learners' needs, their impact on academic performance and challenges experienced. It can influence policy formulation and implementation (practice) locally and internationally and also influence reforms in the provision of School Psychological Services and the concomitant reintroduction of school (guidance) counsellors in schools.

7.6 Limitations of the study

This study extends the current knowledge base by investigating the participants' experiences of Psychological Services in schools. Specifically, this study attempted to confirm the need and importance of Psychological Services in promoting learners' well-being. While the study offers some interesting results within the field of educational psychology, they should be interpreted with some caveats in mind. Hence, it is important to interpret the findings with cognisance of the following limitations:

Representivity: The seventeen schools (9%) that participated in this study do not represent the entire Umlazi and Pinetown Districts with approximately 186 secondary schools. Though learners in the participating schools were diverse, they were not truly representative of the national population. However, random selection of participants minimised the problem.

The scarcity of literature on the subject will be a major handicap which to some extent compromised my literature review. As far as I am aware, there is a shortage of adequate literature on the subject that provides an in-depth study of the problem concerning the delivery of Psychological Services in South African schools. There is no policy document on school psychological services, and the subject of school psychological services has not been researched. The closest there is to school psychological services are departmental policy documents on school guidance and counselling and Life Orientation. Hence, I resorted to using literature focusing on different aspects of School Psychological Services and used international literature and examples to infer what might be the case in the local context. Though our classrooms can be the same in many respects to our foreign counterparts, our situation remains unique in the sense that we are a developing nation, one of the third world countries. I also used the Internet as a source of information and also made use of the inter-library loan facility.

Access to School counsellors: Only a few schools offer Guidance and Counselling, and due to the recent redress and redeployment in schools many teachers including school counsellors have either opted for voluntary severance packages (VSP's) or deemed redundant. The quality of verbal input from this important resource was greatly affected or compromised. The problem was addressed by scheduling appointments and being flexible to accommodate changes; and also interviewing Life Orientation teachers in schools where there were no counsellors. In most schools there were no qualified practicing school counsellors but Life Orientation teachers were 'designated' school counsellors, who stepped in to fill the void.

Informant bias: This is based on the assumption that in-depth interviews with a few key participants, individuals who are particularly knowledgeable and articulate, would provide more insight and good understanding of the problem. A questionnaire was administered to a larger group of learners, complemented by interviews with school principals.

Generalisability of the findings: The study is a multisite case study. Each school is unique with its own characteristics. Hence it is not feasible to find a single example that is representative of others. This means nearly the same thing as representivity. First, although an effort was made to increase the generalisability of this study by including a large number of learners from schools confined to one province (KwaZulu-Natal), the population for this study consisted of predominantly African (Black), urban learners, which excluded rural youth. This could limit the generalizability of the findings to the whole of South Africa, as the findings cannot be assumed to generalise to rural settings. Also, it is hoped that learners gave an untainted and pure perspective of psychological Services to either confirm or refute that of the ‘experts’. Purposive sampling was used in the choice participants as only knowledgeable people or experts were selected, which also means that the ability to generalise may be compromised. However, I attempted to make the sample as representative as possible. Also, an assumption is made that schools in the same area – though unique – are affected by the same social forces equally. Still, caution is warranted in generalising beyond the population involved in the present study.

Subjectivity or Observer bias: This refers to having preconceived ideas, expectations and opinions about what will be observed. These expectations can colour or taint one’s observations and research results. In other words as the researcher, I will see what I want to see and hear what

I want to hear. It is advisable that I remain neutral and non-partisan. This establishes and enhances credibility. There can be no shortcuts in research. To overcome this, I used the same questionnaire to collect data in all the schools indicated above. Also the findings of the research would be discussed with Principals, Teachers, School counsellors and Students to verify accuracy.

Questionnaire: One of the main limitations of this study is that the questionnaire did not give counsellors and learners the opportunity to elaborate on their answers. In my opinion, they did not generate enough qualitative data. Responses given for open-ended questions were mostly single brief sentences (i.e. one-liners). A focus group interview would have clarified the grey areas. When designing questionnaires I attempted to have more open-ended questions and also interviewed school principals to get their perspective on the matter.

Exportability: This is the term coined by Botvin, Baker, Dusenbury, Tortu and Botvin (1990), referring to the packaging of a programme in a manner that will facilitate large-scale dissemination and utilization. As less than 10% of schools in the Umlazi and Pinetown Districts combined were used in this study, it would be presumptuous to conclude that the *status quo* prevails in other schools nationally or entertain thoughts of this programme being implemented in many schools across South Africa. In this case, I focused only on schools in the province and made an assumption that they share common features.

Old sources: Some of the sources (books) cited to in the dissertation were more than a decade old. Though I attempted to get recent publications by the same authors, some of them were

retained because the issues or principles they contain are still relevant today, for example, Elliot and Witt, 1986; Shertzer and Stone, 1976.

Use of newspaper articles: Due to scarcity of literature on the subject of School Psychological Services, I relied on newspaper articles to build a case for the need to explore the importance of such services in schools and benefits thereof for learners. I acknowledge that newspaper articles are not considered academic journals and findings thereof are not based on empirical studies. However, I only used articles in the rationale and recommendations.

Evidence-based research: Studies on school psychological services focus on what counsellors do and do not examine outcomes to demonstrate that learners are different as a result of what counsellors do or did. There are many variables impacting on learners' well-being, and the availability of such services does make a difference.

Despite these limitations the study has provided new insight into the need for School Psychological Services for promoting learners' well-being and the need to promote responsive school environments. It also highlights counsellors' role as catalysts for social change by addressing challenges that have the potential to impact negatively upon the psychosocial development of learners.

7.7 Recommendations for future research

This study raised issues that can help inform current practice as well as stimulate further research and discussion. Though needed in the education of all children, Psychological Services are either not offered in schools or are inadequately provisioned. Life Orientation is one part of the services that are offered in all schools nationally but it does not adequately meet the emotional needs of learners. As gleaned by the results of this study, further inquiries on this matter are highly recommended as they will add value to the Psychological Services knowledge base.

This study could serve as a basis for further research in the following avenues:

- A national empirical study investigating the feasibility of the revival of Psychological Services and its impact on learners' needs;
- An impact analysis of Life Orientation curriculum in helping learners with problems to cope with life challenges, e.g., substance abuse, violence, bullying, sexual violence, suicide etc.;
- The extent to which School Psychological Services meet learners' needs and promote their psychological well-being;
- A longitudinal investigation into the impact of the training of school counsellors by higher education institutions in the provision of Psychological Services;
- A quantitative study on how the availability of counsellors and psychologists in schools enhances learners' mental health and academic performance;
- An experimental study to investigate the cause-and-effect relationship between the availability of Psychological Services and learners' psychological well-being;

- An action research on the implementation of SPS and observation of its impact on learners' well-being and academic performance, and
- An investigation of the impact of District-based Psychologists on learners' psychological well-being.

Additional research is necessary to provide an empirical basis for some of the speculative explanations that I have provided for the results. The study population should include both rural and urban schools and would help researchers determine, for example, whether or not the lower utilisation of services is due to learners' lower needs or better support systems. A decision will then be taken on how to incorporate the issues to offer better services to a more informed and receptive learner population.

7.8 Conclusion of the study

In the words of Liamputtong (2007, p. 1) "the goal of research is that of discerning and uncovering the actual facts of people's lives and experience, facts that have been hidden, inaccessible, suppressed, distorted, misunderstood, and ignored". This study was an attempt to give a voice to the voiceless and has revealed serious flaws in our education system which should be dealt with as a matter of urgency. Although as consumers we embraced the phasing out of Guidance and Counselling and welcomed the introduction of Life Orientation into the fold, one wonders whether it would not have been better if the Guidance and Counselling programme was re-configured rather than sending it to the ideological scrap-yard. As evidenced by the arguments presented above, Psychological Services in most schools are in a state of

disarray, and in dire need of a facelift or a makeover. Where they are offered, the services are inadequate, and they mostly do not include trained counsellors.

Psychologists, counsellors, social workers and other health-care professionals have a shared vested interest in mental health. The fact that they are left out of the equation for the delivery of School Psychological Services means that learners with serious problems have no one to turn to. If learners' problems are not handled properly, our classrooms will gradually be turned into war zones with cameras and metal detectors a common feature. The safety of our children is our main concern and cannot be left to chance. Apart from helping learners to actively participate in the economic upliftment of the country, schools are havens for developing and harnessing talent, and nurturing future leaders in all sectors of the economy, politically, economically, spiritually etc. A country's economic prosperity depends on the mental and physical well-being of its people. Schools have to remain resolute to serving as centres of educational and cultural excellence. In the words of Dr Pallo Jordan, schools should serve as "incubators of our future leadership" (*Sowetan*, March 2, 2009, p.13).

A well-structured SPS programme with preventive and developmental focus would enable the Ministry of Education to address problems such as learners' lack of discipline, substance abuse in schools, sexual abuse, sexual violence (rape), HIV and AIDS, teenage promiscuity, violence and the carrying of dangerous weapons by learners (c.f. *Appendix N*). Most of these problems can be attributed to breakdowns and pathology in homes and the lack of stable, long-term relationships. According to Bostik and Everall (2007), a secure base or safe relationship provides the confidence necessary for teenagers to explore their emerging identities and develop as

autonomous individuals. A psychological programme will not allow parents to abdicate their responsibilities of nurturing children to educators and school counsellors, neither will it burden the education system to make up for all these deficiencies. It is in the best interest of our entire society to lobby for the return of the school counsellor (guidance counsellor) to support our children in their development by fostering proper societal attitudes and values. Our government needs convincing that the psychological well-being of learners should be accorded the same national importance as literacy and numeracy. Lastly, to throw caution to the wind, Psychological Services will not be a panacea for all of society's problems. It would be presumptuous of anyone to contemplate that a single programme of services in schools would solve society's problems. That would be a very simplistic notion of what is considered a complex situation as one programme of Psychological Services cannot reverse the negative effects of disparities created by apartheid education, and the pathology it inflicted on young impressionable souls yearning for knowledge. As the CDC (2009, p. 7) states, "schools cannot solve the nation's most serious health and social problems, but they have a critical role to play in partnership with community agencies and organizations to improve the health and well-being of young people". Psychologists are seen as small social actors in a vast system. Most services implemented in schools are 'band-aid' measures or 'fire-fighting' exercises which were essentially reactive and not proactive and do not address the root cause of problems.

According to the California Department of Education (2003), there are no magic potions or quick fixes that steer lives toward success, productivity, and responsibility. The focus should be on promoting resiliency among children and youth, nurturing them and fostering healthy, productive lives, although the study suggests that Psychological Services, in their present format, are not

dealing adequately with learners' problems. The cornerstone of School Psychological Services is that "prevention is better than cure or intervention", which suggests a proactive approach to psychological intervention. Nevertheless, to paraphrase Brendro *et al.*, (1990, p. 81) education without Psychological Services is tantamount to "sending youth on a journey without a road map" and Snyder and Lopez (2005, p. 61) echoed the same sentiment when they said that "positive psychological support sets the stage for better learning".

Every child needs a 'Life Coach'. As Watts and Kidd (2000, p. 489) put it, "No child and no adult is sufficient unto himself. Only by the help he receives from others can the decisions of life be made". Every child is a natural asset who should enjoy a right to at least one caring and capable adult in their lives. To others he/she is personified by a parent, priest, anybody they admire and look up to. But to many young people in schools, he/she is personified by a teacher or school counsellor. According to Picton (1997), the essence of a good teacher is in her belief in the ability of her learners to succeed. The intricate webs/labyrinth of life can be untangled with the help of a reliable teacher or school counsellor. Children need to think that you care before they care what you think. It is opportune for mental health professionals (i.e. counsellors, psychologists, and social workers) to be purveyors of hope, which is essential to sustaining trust in the future even in the face of adversity. Mental health professionals such as school counsellors and psychologists can make significant contributions to the learning and healthy development of children and adolescents, only if we recognise and value the services they render. As former US Senator David Vitter (2010) put it: "I continue to believe that if children are given the necessary tools to succeed, they will succeed beyond our wildest dreams". We are in 'dire straits' if we choose to be, and a better course would be to implement School

Psychological Services to help learners construct themselves and ensure a positive future for future generations.

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APPENDIX A1



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RE: APPROVAL TO CONDUCT RESEARCH

Please be informed that your application to conduct research has been approved with the following terms and conditions:

That as a researcher, you must present a copy of the written permission from the Department to the Head of the Institution concerned before any research may be undertaken at a departmental institution bearing in mind that the institution **is not obliged to participate** if the research is not a departmental project.

Research should not be conducted during official contact time, as **education programmes should not be interrupted**, except in exceptional cases with special approval of the KZNDoe.

The research is not to be conducted during the fourth school term, except in cases where the KZNDoe deem it necessary to undertake research at schools during that period.

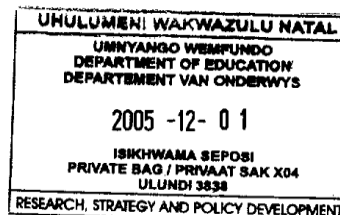
Should you wish to extend the period of research after approval has been granted, an application for extension must be directed to the Director: Research, Strategy Development and EMIS.

The research will be limited to the schools or institutions for which approval has been granted.

A copy of the completed report, dissertation or thesis must be provided to the RSPDE Directorate.

Lastly, you must sign the attached declaration that, you are aware of the procedures and will abide by the same.


SUPERINTENDENT GENERAL
KwaZulu Natal Department of Education



APPENDIX A2



PROVINCE OF KWAZULU-NATAL
ISIFUNDAZWE SAKWAZULU-NATALI
PROVINSIE KWAZULU-NATAL

DEPARTMENT OF EDUCATION
UMNYANGO WEMFUNDO
DEPARTEMENT VAN ONDERWYS

Tel: 033 341 8610
Fax: 033 341 8612

Private Bag X9137
Pietermaritzburg
3200

228 Pietermaritz Street
Pietermaritzburg, 3201

INHLOKOHHOVISI

PIETERMARITZBURG

HEAD OFFICE

Enquiries:
Imibuzo: Sibusiso Alwar
Navrae:

Reference:
Inkomba: 00338/05
Verwysing:

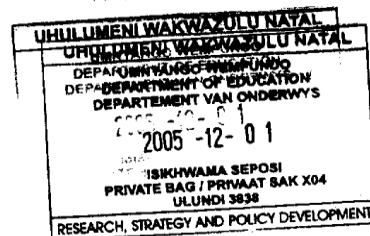
Date:
Usuku: 01 December 2005
Datum:

RE: PERMISSION TO CONDUCT RESEARCH

TO WHOM IT MAY CONCERN

- This is to serve as a notice that **Mr Henry Nkhanedzeni Muribwathoho** has been granted permission to conduct research with the following terms and conditions:
- That as a researcher, he/she must present a copy of the written permission from the Department to the Head of the Institution concerned before any research may be undertaken at a departmental institution.
- Attached is the list of schools she/he has been granted permission to conduct research in. however, it must be noted that the schools are not obligated to participate in the research if it is not a KZNDoe project.
- **Mr Henry Nkhanedzeni Muribwathoho** has been granted special permission to conduct his/her research during official contact times, as it is believed that their presence would not interrupt education programmes. Should education programmes be interrupted, he/she must, therefore, conduct his/her research during nonofficial contact times.
- No school is expected to participate in the research during the fourth school term, as this is the critical period for schools to focus on their exams.


SUPERINTENDENT GENERAL
KwaZulu Natal Department of Education



APPENDIX B1



RESEARCH OFFICE (GOVAN MBEKI CENTRE)
WESTVILLE CAMPUS
TELEPHONE NO.: 031 – 2603587
EMAIL : sshrec@ukzn.ac.za

10 FEBRUARY 2010

MR. H N MURIBWATHOHO (5795)
SCHOOL OF EDUCATIONAL STUDIES

Dear Mr. Muribwathoho

APPROVAL AND CHANGE OF THESIS TITLE
ETHICAL CLEARANCE APPROVAL NUMBER: HSS/0137/06D

I wish to confirm that ethical clearance has been granted full for the following project:

"Psychological services in Secondary Schools: Rhetoric or is it? An analysis of the South African Context"

Any alteration s to the approved research protocol i.e. Questionnaire/Interview Schedule, Informed Consent Form, Title of the Project, Location of the Study must be reviewed and approved through the amendment /modification prior to its implementation. Please quote the above reference number for all queries relating to this study.

PLEASE NOTE: Research data should be securely stored in the school/department for a period of 5 years

Best wishes for the successful completion of your research protocol.

Yours faithfully

.....
PROFESSOR STEVEN COLLINGS (CHAIR)
HUMANITIES & SOCIAL SCIENCES ETHICS COMMITTEE

cc. Supervisor (Prof. O Bojuwoye)
cc. Dr. R Naidoo
cc. Ms. R Govender

APPENDIX B2

Approval and change of dissertation title



25 March 2014

Mr HN Muriwathoho (5795)
School of Education
Edgewood Campus

Protocol reference number: HSS/00137/060

New project title: The state of psychological services in secondary schools: Experiences of principals, teachers, school counsellors and learners

Dear Mr Muriwathoho,

Approval – Amendment / Recertification

I wish to confirm that your application in connection with the above mentioned project has been approved as follows:

- Change in Title
- Change in Supervisor
- Recertification

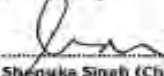
Any alteration/s to the approved research protocol i.e. Questionnaire/Interview Schedule, Informed Consent Form, Title of the Project, Location of the Study, Research Approach/Methods must be reviewed and approved through an amendment /modification prior to its implementation. In case you have further queries, please quote the above reference number.

Please note: Research data should be securely stored in the discipline/department for a period of 5 years.

Recertification must be applied for on an annual basis.

Best wishes for the successful completion of your research protocol.

Yours faithfully


Dr Shesuka Singh (Chair)

/ms

cc Supervisor Professor R Moletsane
cc Academic leader
cc School Admin: Mr Thabisa Mthembu

Humanities & Social Sciences Research Ethics Committee

Dr Shesuka Singh (Chair)

Westville Campus, Govan Mbeki Building

Postal Address: Private Bag X54001, Durban 4000

Telephone: +27 (0) 31 260 3587/83504057 Facsimile: +27 (0) 31 260 4608 Email: smthembu@ukzn.ac.za / shesuka@ukzn.ac.za / inhuma@ukzn.ac.za

Website: www.ukzn.ac.za



1911 - 2010



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Training Centres:

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Pietermaritzburg

Wentworth

APPENDIX C

SCHOOL PSYCHOLOGICAL SERVICES PILOT STUDY QUESTIONNAIRE

You are kindly requested to participate in the filling of this questionnaire which is part of a PhD study entitled: *The state of Psychological Services in secondary schools: Experiences of principals, school counsellors, educators and learners*. The purpose of this questionnaire is to gather information relevant to School Psychological Services and its impact on learners' well-being and academic performance. The assumption is that there is a link (or correlation) between the availability of psychological services and learners' psychological well-being and academic performance. Therefore the overall objective of this questionnaire is to gather information necessary to facilitate implement psychological services to facilitate the holistic development of learners,

School Psychological Services, as used here, encompass a broad spectrum of activities which seek to address the emotional, academic and social needs of learners and educators to promote their mental health. These may include activities directly implemented in the schools to perform to their maximum abilities by providing them with emotional support where necessary.

The information being sought by this questionnaire is for research purposes only. Confidentiality of information will be maintained and participants are not asked to identify themselves by names. Please provide as much accurate information in response to each question, or statement, as possible.

Part One – Biographical Information

1. Indicate by a tick:

1.1	School Name					
1.2	Age	16	17	18	19	20+
1.3	Gender/Sex	Male			Female	
1.4	Grade	Eleven			Twelve	
1.5	Race	African		Indian	White	Coloured

Part Two – Participants' understanding of School Psychological Services

Tick, or cross, "Yes" or "No" to indicate whether you agree or disagree with the following statements regarding learners' needs for psychological services

S/N	What are participants' understandings of School Psychological Services?	YES	NO
1	What is your understanding of school psychological services?		
2	Does your school offer psychological services?		
3	Do you think learners benefit from psychological services?		
4	Give a reason for your answer		

Part Three – Participants’ needs for School Psychological Services

Tick, or cross, “Yes” or “No” to indicate whether you agree or disagree with the following statements regarding learners’ needs for psychological services.

S/N	What are participants’ needs for psychological services?	YES	NO
5	Do you think that learners need psychological services?		
6	Give a reason for your answer		
7	Do you think that learners need school psychological services to help them develop decision-making skills?		
8	Do learners need a counsellor to confide in when they have serious problems?		
9	Do learners need help with career information and decision-making?		
10	Do learners need help with study skills- to improve their academic performance?		
11	Do you think that as learners you need information about the dangers of drug and alcohol abuse?		
12	Do you think learners need more guidance in adolescence than in any other developmental stage?		
13	Give a reason for your answer		
14	Do learners need help with academic problems?		
15	Do you think learners need help to address anxiety, stress and trauma emanating from violence they experience in school? (E.g. rape, bullying & carrying of dangerous weapons)		
16	Do you think learners need help in enhancing their self-worth (strengths and weaknesses)		
17	Learners need educators and counsellors to enhance their self-esteem. Do you agree with the statement?		
18	Give a reason for your answer		

Part Four–Current status of School Psychological Services

Tick, or cross, to indicate your agreement or disagreement as to the following statements.

S/N	Current status of psychological services (various forms)	YES	NO
19	Does your school offer counselling services for learners with problems?		
20	Does your school offer psychological assessments for identifying learning problems?		
21	Does your school offer career guidance – to provide learners with information about careers and the skills required?		
22	Does your school offer study skills straining- to help learners with study skills so they pass examinations?		
23	Does your school offer placement services- for learners to gain admission to higher education and/or admission to special programmes?		
24	Does your school offer referral services – to enable learners to access professional help outside school?		

25	Does your school offer orientation services – programmes to help students acclimatise to new environments?		
26	Does your school offer group guidance services – to attend to learners with problems?		
27	Does your school offer evaluation and follow-up services – to assess the effectiveness of a programme?		
28	Does your school offer suicide prevention programme – for learners so depressed that they thought of killing themselves?		
29	Does your school offer CV writing and other job-related skills?		
30	Does your school offer inclusive education – which caters for learners with learning difficulties or special education needs?		
31	Does your school offer on-site psychological intervention for learners affected/infected with HIV and AIDS?		
32	Does your school offer information services – for learners to make informed decisions or choices?		

Part Five – Resources for implementation of School Psychological Services

Tick or cross to indicate whether you agree or disagree with statements below regarding the resources for the effective implantation of Psychological Services.

S/N	Resources for the implementation of Psychological Services	YES	NO
	<u>Personnel resources</u> (Staffing to ensure the delivery of psychological services)		
33	Does your school have a school counsellor – for student or educator consultation?		
34	Does your school have peer counsellors – for learners to share their problems with fellow-learners?		
35	Is your school contracted to registered psychologists – for learners with serious personal problems?		
	<u>Material resources</u>		
36	Does the school offer guidance and counselling services?		
37	Does the school have a curriculum for psychological services?		
	<u>Physical resources</u>		
38	Office space for one-to-one counselling sessions		
39	Books and other reading materials on careers or life skills education		
	<u>Financial resources</u> (Budget for purchasing requirements for psychological services)		
40	Do you think your school has a budget set aside for psychological services?		
	<u>Political resources</u>		
41	Does the school have a Substance abuse prevention policy?		
42	Does the school have an Inclusive education policy		
43	Does the school have an anti-bullying (violence) policy?		
44	Do you think that the Department of Education is providing you with enough support to implement psychological services		
45	Give a reason for your answer		

Part Six – The Impact of School Psychological Services on learners’ Academic Performance

Tick or cross to indicate whether you agree or disagree with statements below regarding the link between psychological services and academic.

S/N	The relationship between psychological services and learners’ academic performance	YES	NO
46	Do you think there is a relationship between psychological services and learners’ well-being?		
47	Do you think there is a relationship between psychological services and learners’ academic performance?		
48	Give a reason for your answer		
49	Do you think that problems, if unresolved, have a negative effect on learners’ academic performance?		
50	Give a reason for your answer		

Part Seven – Challenges affecting the effective implementation of Psychological Services in schools

Tick, or cross, to indicate whether you agree or disagree with statements below as to what you consider to be obstacles to the implementation of School Psychological Services.

S/N	Obstacles to effective implementation of School Psychological Services	YES	NO
	Do you think the following are challenges impacting on the implementation of psychological services in your school?		
51	Ineffective implementation of psychological services		
52	Teachers who do not give priority to parental involvement (or think that it is inconsequential)		
53	No fulltime school counsellor		
54	Inadequate provision of guidance and counselling services		
55	Inadequate provision of career guidance		
56	Lack of material resources		
57	Lack of financial resources		
58	Lack of appropriate departmental policies (Political resources)		
59	Learners being unaware of the available psychological services		
60	No support for learners with health-related problems, including HIV and AIDS		
61	No support for learners with academic problems		
62	No in-service training of school counsellors		
63	No pre-service training of school counsellors		
64	Confidentiality not being respected by counsellors/educators		
65	No support for learners with social/emotional problems		

Part Eight – Likert Scale on School Psychological Services

Respond to the statement, indicating the extent you agree or disagree with each statement by placing a cross (X) in the appropriate column using the following scales:

1. All schools should have a programme of psychological services.	SD	D	N	A	SA
2. School psychological services would benefit all learners, with or without problems	SD	D	N	A	SA
3. Our school offers lessons in Guidance and Counselling	SD	D	N	A	SA
4. Our school offers lessons in Life Orientation	SD	D	N	A	SA
5. School psychological services include Life Orientation and guidance and counselling	SD	D	N	A	SA
6. The Guidance and Counselling services that our school provides are adequate.	SD	D	N	A	SA
7. Learners are aware of the Guidance and Counselling services available to them	SD	D	N	A	SA
8. The Guidance and Counselling programme in our school meet our needs	SD	D	N	A	SA
9. Qualified psychologists should work with learners with problems	SD	D	N	A	SA
10. There are peer counsellors in my school	SD	D	N	A	SA
11. When I have a serious problem, I would prefer to talk to: School counsellor/ Teacher/Social worker/Friend/Peer counsellor) Choose ONE Reason _____					
12. School counsellor should help learners deal with their problems	SD	D	N	A	SA
13. School counsellors should help learners choose their streams e.g., Science	SD	D	N	A	SA
14. The Guidance and Counselling programme provides students with career information	SD	D	N	A	SA
15. All learners need information about careers	SD	D	N	A	SA
16. Learners should know their strengths and limitations	SD	D	N	A	SA
17. Most learners do not have any idea as to what they are going to do after matric	SD	D	N	A	SA
18. Guidance and Counselling should be offered in all schools	SD	D	N	A	SA
19. Learners should have someone at school to talk to when they are experiencing problems	SD	D	N	A	SA
20. Learners share their problems with fellow learners because teachers cannot be trusted with confidential information	SD	D	N	A	SA
21. I have contemplated suicide once because I was feeling depressed and helpless	SD	D	N	A	SA
22. Learners drop out of school due to frustration	SD	D	N	A	SA
23. Learners and educators infected or affected by HIV/AIDS need psychological support, including counselling, at school	SD	D	N	A	SA

24. Many learners in the school are victims of domestic violence	SD	D	N	A	SA
25. High school learners need information about applying for bursaries	SD	D	N	A	SA
26. Peer pressure is a serious problem to most learners	SD	D	N	A	SA
27. Teachers are in a better position to intervene when learners have problems than social workers	SD	D	N	A	SA
28. All schools, whether primary or secondary, should offer Guidance and Counselling	SD	D	N	A	SA
29. The subjects Life Orientation and Guidance and Counselling are one and the same	SD	D	N	A	SA
30. Guidance and Counselling should be an examinable school subject.	SD	D	N	A	SA
31. Life Orientation should be compulsory to all grades	SD	D	N	A	SA
32. Life Orientation should be an examinable subject in all grades.	SD	D	N	A	SA
33. All learners need help with study skills	SD	D	N	A	SA
34. I have witnessed a violent act within a year which left me traumatised.	SD	D	N	A	SA
35. There are many traumatised learners (e.g. as a result of divorce, accidents, living with a terminal disease, violence, rape etc.) in our school who need to consult with psychologists	SD	D	N	A	SA
36. To be effective in helping learners with problems schools should work closely with psychologists and social workers	SD	D	N	A	SA
37. I have a substance abuse problem	SD	D	N	A	SA
38. Most teenagers are afraid or feel awkward or shy to talk to their parents about sex	SD	D	N	A	SA
39. Teenage pregnancy is a problem that warrants serious attention in my school	SD	D	N	A	SA
40. The needs of pregnant teens are not catered for in our school	SD	D	N	A	SA
41. Teenagers' psychological well-being influences their academic performance.	SD	D	N	A	SA
42. Problems, if unresolved, have a negative influence on learners' academic performance.	SD	D	N	A	SA
43. The Guidance and Counselling programme in my school need to be improved	SD	D	N	A	SA
Thank you for completing this questionnaire as accurately as you have.					

APPENDIX D

SCHOOL PSYCHOLOGICAL SERVICES LEARNERS' QUESTIONNAIRE

You are kindly requested to participate in the filling of this questionnaire which is part of a PhD study entitled: *The state of Psychological Services in secondary schools: Experiences of principals, school counsellors, educators and learners*. The purpose of this questionnaire is to gather information relevant to School Psychological Services and its impact on learners' well-being and academic performance. The assumption is that there is a link (or correlation) between the availability of Psychological Services and learners' psychological well-being and academic performance. Therefore the overall objective of this questionnaire is to gather information on the implementation of Psychological Services to facilitate the holistic development of learners,

School Psychological Services, as used here, encompass a broad spectrum of activities which seek to address the emotional, academic, career and social needs learners and educators to promote their mental health. These may include activities directly or indirectly implemented in schools to help learners and educators perform to their maximum abilities by providing them with emotional support where necessary. These activities include guidance (personal, educational, and career guidance), counselling, Life Skills education, remedial education, Life Orientation, Sexuality education, Health (HIV & AIDS) education, Substance/drug abuse prevention, etc.

The information being sought by this questionnaire is with regard to School Psychological Services as outlined above. The information is for research purposes only. Confidentiality of information will be observed and participants are not asked to identify themselves by names. Please provide as much accurate information as possible in response to the questions, or statements below.

Part One – Biographical Information

1. Indicate by a tick:

1.1	Learner's Name	(Optional)			
1.2	Age	16	17	18	19+
1.3	Gender/Sex	Male		Female	
1.4	Grade	Eleven		Twelve	
1.5	Race	African	Indian	White	Coloured

Part Two – Learners' understanding of School Psychological Services

Tick, or cross, "Yes" or "No" to indicate whether you agree or disagree with the following statements regarding your understanding of Psychological Services

S/N	What is learners' understanding of School Psychological Services?	YES	NO
2.1	What is your understanding of School Psychological Services?		
2.2	Does your school offer Psychological Services?		
2.3	Do you think learners benefit from Psychological Services?		
2.4	Give a reason for your answer		

Part Three – Learners’ needs for School Psychological Services

Tick, or cross, “Yes” or “No” to indicate whether you agree or disagree with the following statements regarding learners’ needs for Psychological Services

S/N	What are learners’ needs for Psychological Services?	YES	NO
3.1	Learners need Psychological Services to assist them in their academic development		
3.2	Give a reason for your answer		
3.3	Learners need school psychological services to help them develop decision-making skills		
3.4	Learners need a counsellor to confide in when they have serious problems		
3.5	Learners need help with career information and decision-making?		
3.6	Learners need help with study skills- to improve their academic performance		
3.7	Learners you need information about the dangers of drug and alcohol abuse		
3.8	Learners need more guidance in adolescence than in any other developmental stage		
3.9	Give a reason for your answer		
3.10	Learners need psychological services to help them with academic problems		
3.11	Learners need help to address anxiety, stress and trauma emanating from violence they experience in school? (E.g. rape, bullying & carrying of dangerous weapons)		
3.12	Learners need help in enhancing their self-worth (strengths and weaknesses)		
3.13	Learners need educators and counsellors to enhance their self-esteem.		
3.14	Give a reason for your answer		
3.15	Learners need help in developing friendship and interpersonal skills		
3.16	Learners’ need to belong – to feel valued and appreciated		
3.17	Learners need for recognition – to feel worthy and responsible		
3.18	Learners’ need for safety – for protection from any physical or emotional harm		
3.19	Learners need psychological services to develop problem-solving skills		
3.20	Learners need psychological services to plan their future, get employment, and be a responsible citizen		
3.21	Learners need skills on how to handle peer pressure?		
3.22	Learners need to be taught about respect and self-discipline		
3.23	Have you ever had a traumatic experience?		
3.24	Specify the nature of the experience		
3.25	Have you ever thought of killing yourself?		
3.26	Give a reason for your answer		
3.27	Did you talk to anyone about it?		
3.28	Who and why?		

Part Four–Current status of School Psychological Services

Tick, or cross, to indicate your agreement or disagreement as to the following statements regarding the current status of School Psychological Services.

S/N	Current status of psychological services (various forms)	YES	NO
4.1	Our school offers counselling services for learners with problems		
4.2	Life Orientation/ Life Skills education is offered in our school		
4.3	Our school offers psychological assessments for identifying learning problems		
4.4	Our school offers career guidance – to provide learners with information about careers and the skills required		
4.5	Our school offers study skills straining- to help learners with study skills so they pass examinations		
4.6	Our school offers placement services- for learners to gain admission to higher education and/or admission to special programmes		
4.7	Our school offers referral services – to enable learners to access professional help outside school		
4.8	Our school offers orientation services – programmes to help students acclimatize to new environments		
4.9	Our school offers group guidance services – to attend to learners with problems		
4.10	Our school offers evaluation and follow-up services – to assess the effectiveness of a programme		
4.11	Our school offers suicide prevention programme – for learners so depressed that they thought of killing themselves		
4.12	Our school offers CV writing and other job-related skills		
4.13	Our school offers inclusive education – which caters for learners with learning difficulties or special education needs		
4.14	Our school offers on-site psychological intervention for learners affected/infected with HIV and AIDS		
4.15	Our school offer information services – for learners to make informed decisions or choices		
4.16	Our school offers measures against school violence, including bullying		
4.17	Our school offers a substance abuse prevention programme which educates and warns us about the dangers of drugs and alcohol		
4.18	Our school offer trauma counselling for traumatised learners		
	Our school offers sex education lessons		
	Our school provides information about the dangers of substance abuse		
4.19	As learners we are not aware of the psychological services available in our school		
4.20	What is the one issue bothering you at present?		
4.21	Life Orientation does help learners with problems		
4.22	Give a reason for your answer		
4.22	If any improvements can be made to the psychological services programme, what should that be?		

Part Five – Resources for implementation of School Psychological Services

Tick or cross to indicate whether you agree or disagree with statements below regarding the resources for the effective implementation of School Psychological Services.

S/N	Resources for the implementation of Psychological Services	YES	NO
5.1	<u>Personnel resources</u> (Staffing to ensure the delivery of Psychological Services)		
5.1.1	Our school has a school counsellor – for student or educator consultation		
5.1.2	Our school has peer counsellors – for learners to share their problems with fellow-learners		
5.1.3	Our school contracted to registered psychologists – for learners with serious personal problems		
5.2	<u>Material resources</u>		
5.2.1	Our school offers guidance and counselling services		
5.2.2	Our school has a curriculum for psychological services		
5.2.3	Our school offers Life Skills education		
5.2.4	The Department of Education offers in-service programmes for school counsellors		
5.2.5	Life Orientation would help learners with problems		
5.2.6	Our school has a nutrition programme		
5.3	<u>Physical resources</u>		
5.3.1	Our school has office space for one-to-one counselling sessions		
5.3.2	Our school library has books and other reading materials on careers or Life Skills education		
5.4	<u>Financial resources</u> (Budget for purchasing requirements for psychological services)		
5.4.1	Our school has a budget set aside for psychological services		
5.5	<u>Political resources</u>		
5.5.1	Our school has a Substance abuse prevention policy		
5.5.2	Our school has an Inclusive education policy		
5.5.3	Our school have an anti-bullying (violence) policy		
5.5.4	The Department of Education provides our school with enough material and financial support to implement psychological services		
5.5.5	Give a reason for your answer		

Part Six – The Impact of Psychological Services on learners’ Academic Performance

Tick or cross to indicate whether you agree or disagree with statements below regarding the link between psychological services and learners’ academic performance.

S/N	The relationship between psychological services and learners’ academic performance	YES	NO
6.1	There is a relationship between psychological services and learners’ well-being		
6.2	There is a relationship between psychological services and learners’ academic performance		
6.3	Give a reason for your answer		
6.4	Problems, if unresolved, have a negative effect on learners’ academic performance?		
6.4	Give a reason for your answer		

Part Seven – Challenges (obstacles) affecting the effective implementation of Psychological Services in schools

Tick, or cross, to indicate whether you agree or disagree with statements below as to what you consider to be obstacles to the implementation of School Psychological Services.

S/N	Do you think the following are obstacles impacting on the implementation of Psychological Services in your school?	YES	NO
7.1	Ineffective implementation of Psychological Services		
7.2	Teachers who do not give priority to parental involvement (or think that it is inconsequential)		
7.3	No fulltime school counsellor		
7.4	Inadequate provision of guidance and counselling services		
7.5	Inadequate provision of career guidance		
7.6	Lack of material resources (e.g. books and other reading materials)		
7.7	Lack of financial resources (availability of school funds)		
7.8	Lack of appropriate departmental policies (Political resources)		
7.9	Learners being unaware of the available Psychological Services		
7.10	No support for learners with health-related problems, including HIV and AIDS		
7.11	No support for learners with academic problems		
7.12	No in-service training of school counsellors		
7.13	No pre-service training of school counsellors		
7.14	Confidentiality not being respected by counsellors/educators		
7.15	No support for learners with social/emotional problems		
7.16	Are there any other challenges which you think impact on the delivery of psychological services? Name them		

APPENDIX E

SCHOOL PSYCHOLOGICAL SERVICES SCHOOL COUNSELLORS' QUESTIONNAIRE

You are kindly requested to participate in the filling of this questionnaire which is part of a PhD study entitled: *The state of Psychological Services in secondary schools: Experiences of principals, school counsellors, educators and learners*. The purpose of this questionnaire is to gather information relevant to School Psychological Services and its impact on learners' well-being and academic performance. The assumption is that there is a link (or correlation) between the availability of Psychological Services and **learners'** psychological well-being and academic performance. Therefore the overall objective of this questionnaire is to gather information on the implementation of Psychological Services to facilitate the holistic development of learners.

School Psychological Services, as used here, encompass a broad spectrum of activities which seek to address the emotional, academic, career and social needs learners and educators to promote their mental health. These may include activities directly or indirectly implemented in schools to help learners and educators perform to their maximum abilities by providing them with emotional support where necessary. These activities include guidance (personal, educational, and career guidance), counselling, Life Skills education, remedial education, Life Orientation, Sexuality education, Health (HIV & AIDS) education, Substance/drug abuse prevention, etc.

The information being sought by this questionnaire is with regard to School Psychological Services as outlined above. The information is for research purposes only. Confidentiality of information will be observed and participants are not asked to identify themselves by names. Please provide as much accurate information as possible in response to the questions, or statements below.

Part One – Biographical Information

1. Indicate by a tick:

1.1	School Name	(Optional)			
1.2	Gender/Sex	Male		Female	
1.3	Remuneration	State		SGB	
1.4	Professional Qualification	Diploma		Degree	
1.5	Race	African	Indian	White	Coloured
1.6	Professional Experience	1-10	11-20	21-30	31+

Part Two – Educators' understanding of School Psychological services

Tick, or cross, "Yes" or "No" to indicate whether you agree or disagree with the following statements regarding your understanding of Psychological Services

S/N	What is educators' understanding of School Psychological Services?	YES	NO
2.1	What is your understanding of School Psychological Services?		
2.2	Does your school offer Psychological Services?		
2.3	Do you think learners benefit from Psychological Services?		
2.4	Give a reason for your answer		
2.5	Does your school offer adequate guidance and counselling?		
2.6	Give a reason for your answer		

Part Three – Learners' needs for School Psychological Services

Tick, or cross, "Yes" or "No" to indicate whether you agree or disagree with the following statements regarding learners' needs for Psychological Services

S/N	What are learners' needs for Psychological Services	YES	NO
3.1	Learners need psychological services		
3.2	Give a reason for your answer		
3.3	Learners need school psychological services to help them develop decision-making skills		
3.4	Learners need a counsellor to confide in when they have serious problems		
3.5	Learners need help with career information and decision-making		
3.6	Learners need help with study skills- to improve their academic performance		
3.7	Learners you need information about the dangers of drug and alcohol abuse		
3.8	Learners need more guidance in adolescence than in any other developmental stage		
3.9	Give a reason for your answer		
3.10	Learners need help with academic problems		
3.11	Learners need help to address anxiety, stress and trauma emanating from violence they experience in school? (E.g. rape, bullying & carrying of dangerous weapons)		
3.12	Do you think learners need help in enhancing their self-worth (strengths and weaknesses)		
3.13	Learners need educators and counsellors to enhance their self-esteem		
3.14	Give a reason for your answer		
3.15	Learners need help in developing friendship and interpersonal skills		
3.16	Learners need psychological services to develop problem-solving skills		
3.17	Learners need psychological services to plan their future, get employment, and be a responsible citizen		
3.18	Learners need skills on how to handle peer pressure		
3.19	Learners need to be taught about respect and self-discipline		
3.20	Have you ever had a traumatic experience?		

3.20	Explain
3.21	How would you describe adolescence?

Part Four –Current status of School Psychological Services

Tick, or cross, to indicate your agreement or disagreement as to the following statements regarding the current status of psychological services.

S/N	Current status of psychological services (various forms)	YES	NO
4.1	Our school offers counselling services for learners with problems		
4.2	Our school offers lessons in Life Orientation		
4.3	Our school offers psychological assessments for identifying learning problems		
4.4	Our school offers career guidance – to provide learners with information about careers and the skills required		
4.5	Our school offers study skills training- to help learners with study skills so they pass examinations		
4.6	Our school offers placement services- for learners to gain admission to higher education and/or admission to special programmes		
4.7	Our school offers referral services – to enable learners to access professional help outside school		
4.8.	Our school offers orientation services – programmes to help students acclimatize to new environments		
4.9.	Our school offers group guidance services – to attend to learners with problems		
4.10	Our school offers evaluation and follow-up services – to assess the effectiveness of a programme		
4.11	Our school offers suicide prevention programme – for learners so depressed that they thought of killing themselves		
4.12	Our school offers CV writing and other job-related skills		
4.13	Our school offers inclusive education – which caters for learners with learning difficulties or special education needs		
4.14	Our school offers on-site psychological intervention and support for learners affected/infected with HIV and AIDS		
4.15	Our school offers information services – for learners to make informed decisions or choices		
4.16	Our school programme offers consultation services for educators and learners with problems		
4.17	Our programme caters for learners with special needs		
4.18	Give a reason for your answer		
4.19	Our school teaches learners about values education and ‘Ubuntu’ philosophy		
4.20	Our school offers measures against school violence, including bullying		
4.21	Our school offers a substance abuse prevention programme which warns learners about the dangers of drugs and alcohol		
4.22	Our school offers sex education lessons		
4.23	Our school provides trauma counselling to both learners and		

	educators		
4.24	Many learners are not aware of the psychological services available in their school		
4.25	Life Orientation will help learners with problems		
4.26	Give a reason for your answer		
4.27	What are the three main disciplinary problems in your school?		
4.28	If any improvements can be made to your psychological services programme, what would that be?		

Part Five – Resources for implementation of School Psychological Services

Tick or cross to indicate whether you agree or disagree with statements below regarding the resources for the effective implementation of Psychological Services.

S/N	Resources for the implementation of Psychological Services	YES	NO
5.1	<u>Personnel resources</u> (Staffing to ensure the delivery of psychological services)		
5.1.1	Our school has a school counsellor – for student or educator consultation		
5.1.2	Our school has peer counsellors – for learners to share their problems with fellow-learners		
5.1.3	Our school contracted to registered psychologists – for learners with serious personal problems		
5.14	Our programme of psychological services has a Teacher Support Team (TST)		
5.15	To what extent are parents involved in the programme	30%50%100%	
5.16	The Department of education provides in-service training for school counsellors		
5.2	<u>Material resources</u>		
5.2.1	Our school offers guidance and counselling services		
5.2.2	Our school has a curriculum for psychological services		
5.2.3	Our psychological services programme includes career guidance		
5.2.4	Guidance and counselling should be offered concurrently with Life Orientation		
5.2.5	Give a reason for your answer		
5.2.6	Educators are adequately prepared to implement the FET curriculum, which includes Life Orientation		
5.2.7	Give a reason for your answer		
5.2.8	Psychological services offers Life Skills education as part of Life Orientation		
5.2.9	The DoE provides in-service training workshops for school counsellors		
5.2.10	Our school has a nutrition programme		
5.3	<u>Physical resources</u>		
5.3.1	Our school has office space for one-to-one counselling sessions		
5.3.2	Our school library has books and other reading materials on careers or Life Skills education		

5.4	Financial resources (Budget for purchasing requirements for psychological services)		
5.4.1	Our school has a budget set aside for psychological services		
5.5	Political resources		
5.5.1	Our school has a Substance abuse prevention policy		
5.5.2	Our school has an Inclusive education policy		
5.5.3	Our school has an anti-bullying (violence) policy		
5.5.4	The Department of Education provides our school with enough material and financial support to implement psychological services		
5.5.5	Give a reason for your answer		

Part Six – The Impact of Psychological services on learners’ Academic Performance

Tick or cross to indicate whether you agree or disagree with statements below regarding the link between psychological services and learners’ academic performance.

S/N	The relationship between psychological services and learners’ academic performance	YES	NO
6.1	There is a relationship between psychological services and learners’ well-being		
6.2	There is a relationship between learners’ psychological well-being and academic performance		
6.3	Give a reason for your answer		
6.4	Problems, if unresolved, tend to have a negative effect on learners’ academic performance		
6.5	Give a reason for your answer		

Part Seven – Challenges affecting the effective implementation of Psychological services in schools

Tick, or cross, to indicate whether you agree or disagree with statements below as to what you consider to be obstacles to the implementation of School Psychological Services.

S/N	Obstacles to effective implementation of School Psychological Services		
7	Do you think the following are challenges impacting on the implementation of psychological services in your school?		
7.1	Ineffective implementation of psychological services		
7.2	Teachers who do not give priority to parental involvement (or think that it is inconsequential)		
7.3	No fulltime school counsellor		
7.4	Inadequate provision of guidance and counselling services		
7.5	Inadequate provision of career guidance		
7.6	Lack of material resources		
7.7	Lack of financial resources		
7.8	Lack of appropriate departmental policies (Political resources)		

7.9	Learners being unaware of the available psychological services		
7.10	No support for learners with health-related problems, including HIV and AIDS		
7.11	No support for learners with academic problems		
7.12	No in-service training of school counsellors		
7.13	No pre-service training of school counsellors		
7.14	Confidentiality not being respected by counsellors/educators		
7.15	No support for learners with social/emotional problems		
7.16	Domestic violence is a problem in the community affecting many learners		
7.17	The programme does not cater for learners with special needs		
7.19	There are many traumatised learners in the school who need specialised attention		
7.20	Educators do not feel adequately prepared to implement FET curriculum		
7.21	What are the common disciplinary problems in your school?		
7.22	Are there any other challenges which you think impacts on the delivery of psychological services? Name them		

APPENDIX F

INTERVIEW SCHEDULE **PRINCIPALS**

You are kindly requested to participate in a 40-60 minute interview as part of a PhD study which is looking into Psychological Services in Schools. The title of the study is: *“The state of Psychological Services in secondary schools: Experiences of principals, school counsellors, educators and learners”*. The purpose of the interview is to gather information relevant to school psychological services and its impact on learners’ well-being and academic performance. The assumption is that there is a link (or correlation) between the availability of psychological services and learners’ psychological well-being and academic performance. Therefore the overall objective of this interview is to gather information on the implementation of psychological services to facilitate the holistic development of learners,

The information being sought by interview is with regard to school psychological services as outlined above. The information is for research purposes only. Confidentiality of information will be observed and participants are not asked to identify themselves by names. Please provide as much accurate information as possible in response to the questions below.

With your permission, I would like to audio-record our conversation so that I don’t miss any important information you give me. I undertake to keep the interview data confidential. Only myself and my PhD supervisor will have access to it and when the PhD is completed, the data will be stored securely for 5 years, after which it will be destroyed or deleted. (IF THE PERSON AGREES, THEN MAKE SURE TAPE IS ON RECORD)

Part One – Biographical Information

1. School and Biographical information:

1.1	School Name				
1.2	Enrolment				
1.3	Number of staff				
1.4	Gender/Sex	Male		Female	
1.5	Race	African	Indian	White	Coloured
1.6	Professional Qualifications	Diploma		Degree	
1.7	Professional Experience (yrs)	1-10	11-20	21-30	31+
1.8	Experience as principal (yrs)	1-5	6-10	11-15	16-20+

START INTERVIEW:

1. Professional Information

- a. How long have you been a teacher? At this school?*
- b. What are your qualifications?*
- c. What is your position in the school? How long have you held this position?*
- d. What is your role in relation to psychological services?*
- e. What kind of training have you had for the position?*

Part Two – Principals’ understandings of School Psychological Services

- 2. Provide your own definition of “adolescence”*
- 3. How do you understand and define “School Psychological Services”?*
- 4. What is the current policy regarding school psychological services? How does it address the provision of services?*
- 5. In your view, does the CAPS policy facilitate or inhibit the provision of psychological services? In what ways?*
- 6. In your view, do schools generally, and your school in particular, need psychological services? If, so:*
 - a. What are some of the issues that require psychological services in your school?*
 - b. What kinds of services are needed?*
 - c. Who provides the services?*
- 7. In your view, based on the needs of the school community, does your school provide adequate psychological services?*
 - a. If so, explain. If not, what barriers do you face in the provision of these services?*
 - b. What do you think is needed to address these barriers?*
 - c. Who should provide the resources needed?*
- 8. Do you think that there is a need for a dedicated school counsellor in each school?*
 - a. Why so?*

- b. Does your school have one?*
 - c. If not, who provides the services needed?*
- 9. In your view, can school psychological services tackle these issues?*
 - a. Why so?*
- 10. Do you think that educators need psychological services? What are some of their issues requiring intervention?*
- 11. Do you think that learners' well-being influence their academic performance?*
Give a reason for your answer

Thank you for your time.

APPENDIX G

LETTER TO SCHOOL PRINCIPALS

Faculty of Education
University of KwaZulu-Natal
Private Bag X54001
DURBAN
4000
Tel. (031) 260-7011
Fax (031) 260-7003

The Principal/Headmaster

Dear Sir/Madam

RE: PERMISSION TO CONDUCT RESEARCH:

My name is Henry Muribwathoho. I am a lecturer at the University of KwaZulu-Natal, Edgewood campus. I am currently doing a Ph.D. research on Psychological Services in high schools. I will be looking at School Psychological Services, which includes guidance and counselling as well Life Orientation programmes. Nineteen high schools will participate in this study and your school is one of them. The research involves interviewing one teacher, preferably the school counsellor or Life Orientation teacher and administering a questionnaire to fifty learners per school. Only learners in grades 11 and 12 will complete the questionnaire, which takes about 20 minutes to complete. I will take learners in clusters or per class, meaning that I will take two classes, one in grade 11 and the other, in grade 12. In the event that the classes are larger than 25, the whole class will be used to minimize disruptions.

The provincial Department of Education has already granted permission to access the schools. Enclosed herewith is proof thereof. I will appreciate it if you could inform me when I should visit your school. It is my plan to complete data collection by the end of this year.

I am required by the Department of Education not to cause any disturbance of the daily activities of the school. I intend to do my best to respect that.

I will appreciate it if you grant me permission to visit your school.

Yours faithfully

H.N. Muribwathoho
Lecturer

APPENDIX H

CONSENT FORM

My name is Henry Muribwathoho. I am a lecturer and post-graduate student at the University of KwaZulu-Natal (Edgewood Campus). I am conducting research on Psychological Services (i.e. Guidance and Counselling) in High Schools.

Your voluntary participation in this research will be valued. You have not been coerced to participate and are free to withdraw at any stage of the interview. Participation will be in the form of a questionnaire. If you agree to be part of the research, please have the consent form below completed by you (if over 18yrs old) or your parent/guardian and returned.

All information will be treated as confidential. No names will be recorded to ensure anonymity of all participants.

CONSENT FORM

I, _____ (Full Name Printed) parent/guardian

of _____ (Name of Child) consent to his/her participation in the research project.

.....

SIGNATURE

...../...../.....

DATE

IFOMU YEMVUME

I gama lami ngingu Henry Muribwathoho, ngingumfundisi e nyuvesi kwa-Zulu-Natal, Edgewood campus. Ngenza ucwaningo kwezengqondo, ukweluleka abafundi ezimeni enzima abadlula kuzo noma ababhekene nazo. Lolu cwaningo ngilwenza ezikoleni zama banga aphakeme (high schools).

Ukuzinikela kwakho ukuthi ube yingxenge yalolucwaningo. Kungaba into encomekayo kakhulu, awuphoqiwe ukuthi ube yingxenge ya lolu cwaningo. Futhi ukhululekile ukuthi ungahoxa kunoma yisiphi isigaba salemibuzo.

Ukuzibandakanya kwakho kulolu ncwaningo kuzoba ukuphendula imibuzo ozobe ubuzwa yona.

Uma uvuma ukuba yingxenge yalolucwaningo, ngicela ugcalise lelifomu elingezanzi.

Kufanele u be neminyaka engu 18 noma ngaphezulu, noma umzali, noma umnakekeli wakho. Uma usuqedile ukuligcalisa kubalulekile ukuthi usibuyisele lona.

Yonke into ositshele yona izoba yimfihlo. Akukho gama lamuntu elizoshicilelwa phansi, ukuqinisekisa ukuthi bonke abantu ababambe iqhaza bangaziwa.

IFOMU

Mina _____ (amagama aphelele) umzali ka / umnakekeli ka _____ (igama lengane) ngiyavuma ukuthi ingani yami ibe yingxenge yalolucwaningo.

ISIGINESHA:

_____/_____/_____
USUKU

APPENDIX I

NUMBER OF LEARNERS PER SCHOOL

		Frequency	Percent	Cumulative Percent
Valid	B	60	7.8	7.8
	I	24	3.1	10.9
	N	52	6.7	17.6
	L	46	6.0	23.5
	P	50	6.5	30.0
	G	60	7.8	37.8
	Q	17	2.2	40.0
	C	29	3.8	43.7
	F	53	6.9	50.6
	M	67	8.7	59.2
	J	40	5.2	64.4
	O	51	6.6	71.0
	A	30	3.9	74.9
	K	50	6.5	81.4
	D	51	6.6	88.0
	E	37	4.8	92.8
	H	56	7.2	100.0
	Total	773	100.0	

N.B. Learners in Schools “R” and “S” did not complete the questionnaire.

APPENDIX J

THE ADVERT

An advert for a School Psychologist (Post Level 2) by the Province of KwaZulu-Natal Department of Education (*Sunday Times*, February 18, 2007: p32) listed the following responsibilities for a successful candidate:

- *Development, implementation, and management of an effective psycho-social support programme for learners*
- *Engaging and supervising all psycho-therapeutic support programmes for group or individual learners*
- *Assessment of learners experiencing barriers to learning and development, provide guidelines to educators to assist those learners requiring additional support*
- *Working in consultation with other relevant professionals to the specialized needs of the learners at schools*
- *Continually monitoring, assessing and evaluating the impact of psycho-social and psycho-educational intervention strategies in assisting learners to actualize themselves optimally in learning and other life situations,*
- *Providing professional support to the District Based Support Team and the Institution Based Support Team*
- *Co-responsible for developing and implementing the admission of learners to the school according to set procedures outlined by the Provincial Department of Education*
- *Sharing in the responsibilities of organizing and conducting extra and co-curricular activities*
- *Keeping records of all interventions, treatment programmes and progress of learners*
- *Serving as a member of the SMT of the school in respect to psycho-social and psycho-educational support programmes*

Sunday Times, 18 February, 2007: p32

APPENDIX K

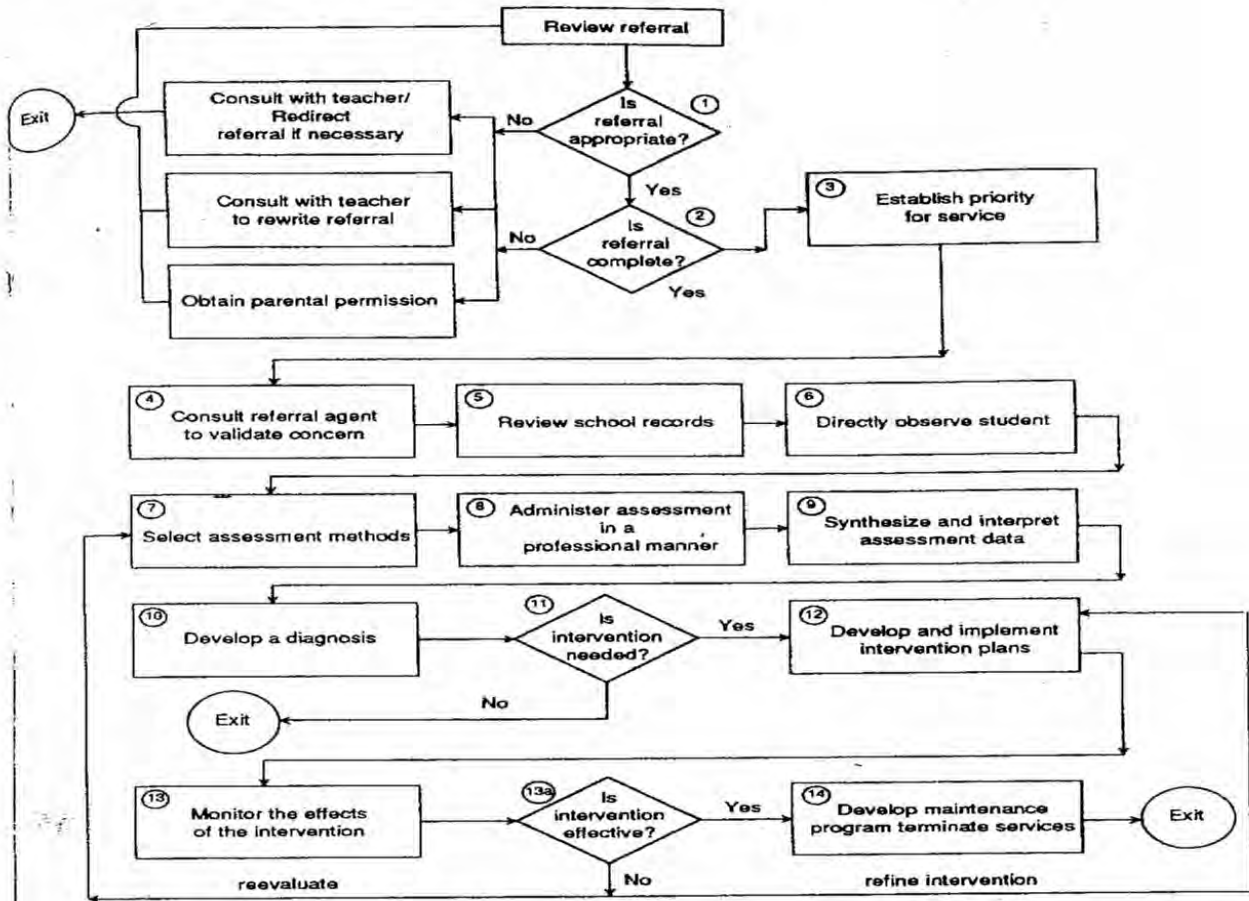


Figure 2. Generic model of school psychological service delivery. From *School Psychology: Essentials of Theory and Practice* (p. 58), by C. R. Reynolds, T. B. Gutkin, S. N. Elliott, & J. C. Witt, 1984, New York: Wiley. Copyright 1984 by John Wiley & Sons. Reprinted by permission.

APPENDIX L

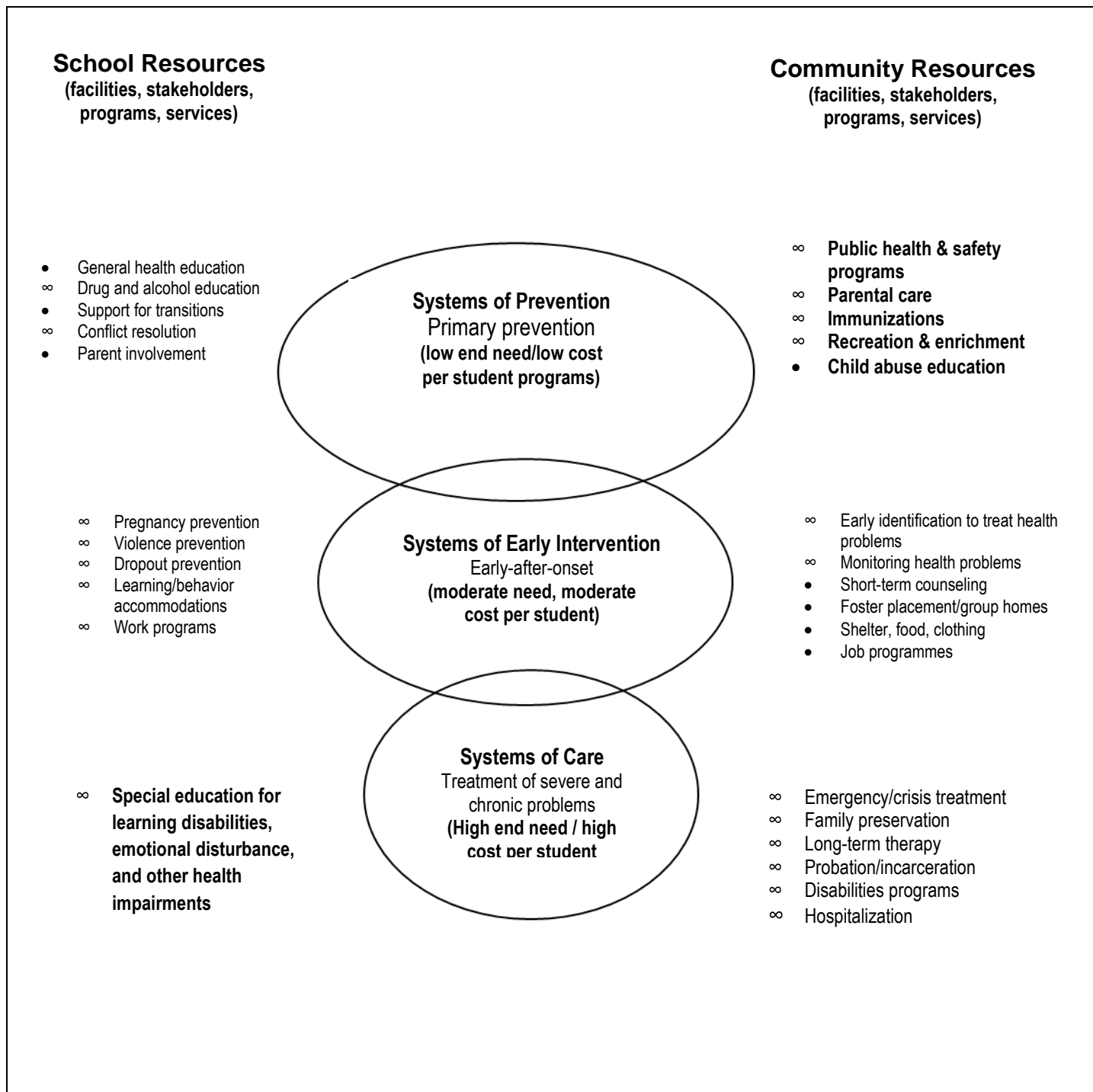
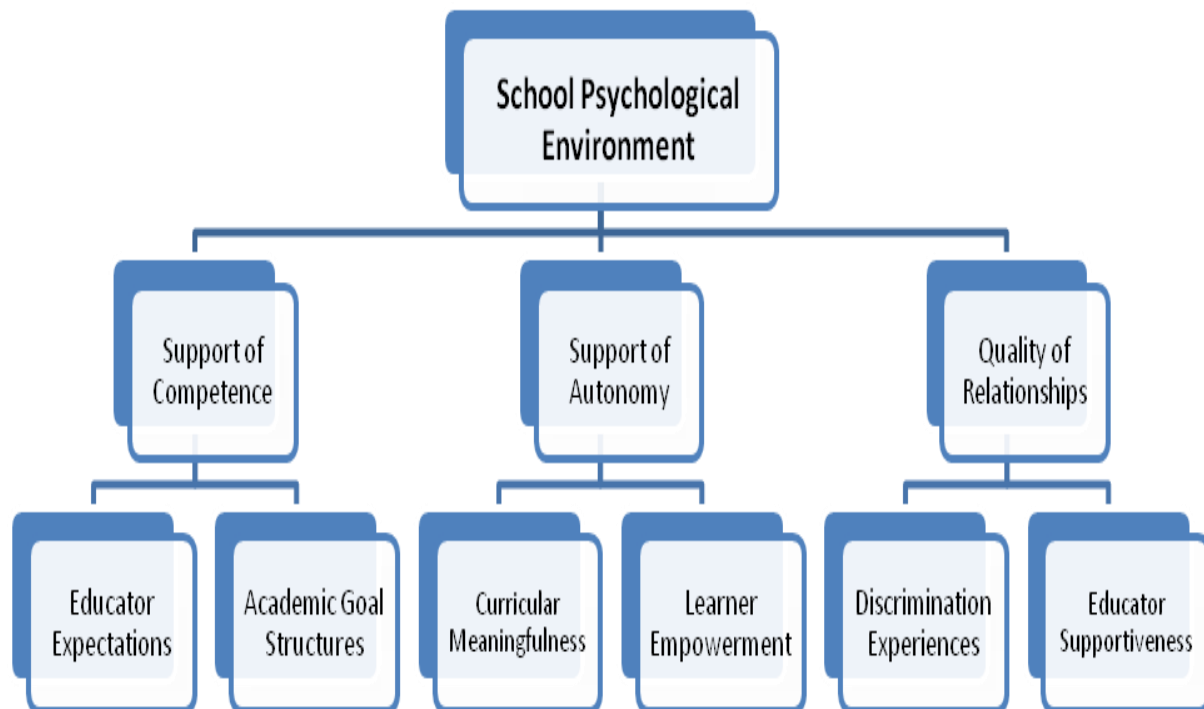


FIGURE 4: Inter-connected systems for meeting the needs of all students.
(Adapted from Adelman & Taylor, 1998: 143)

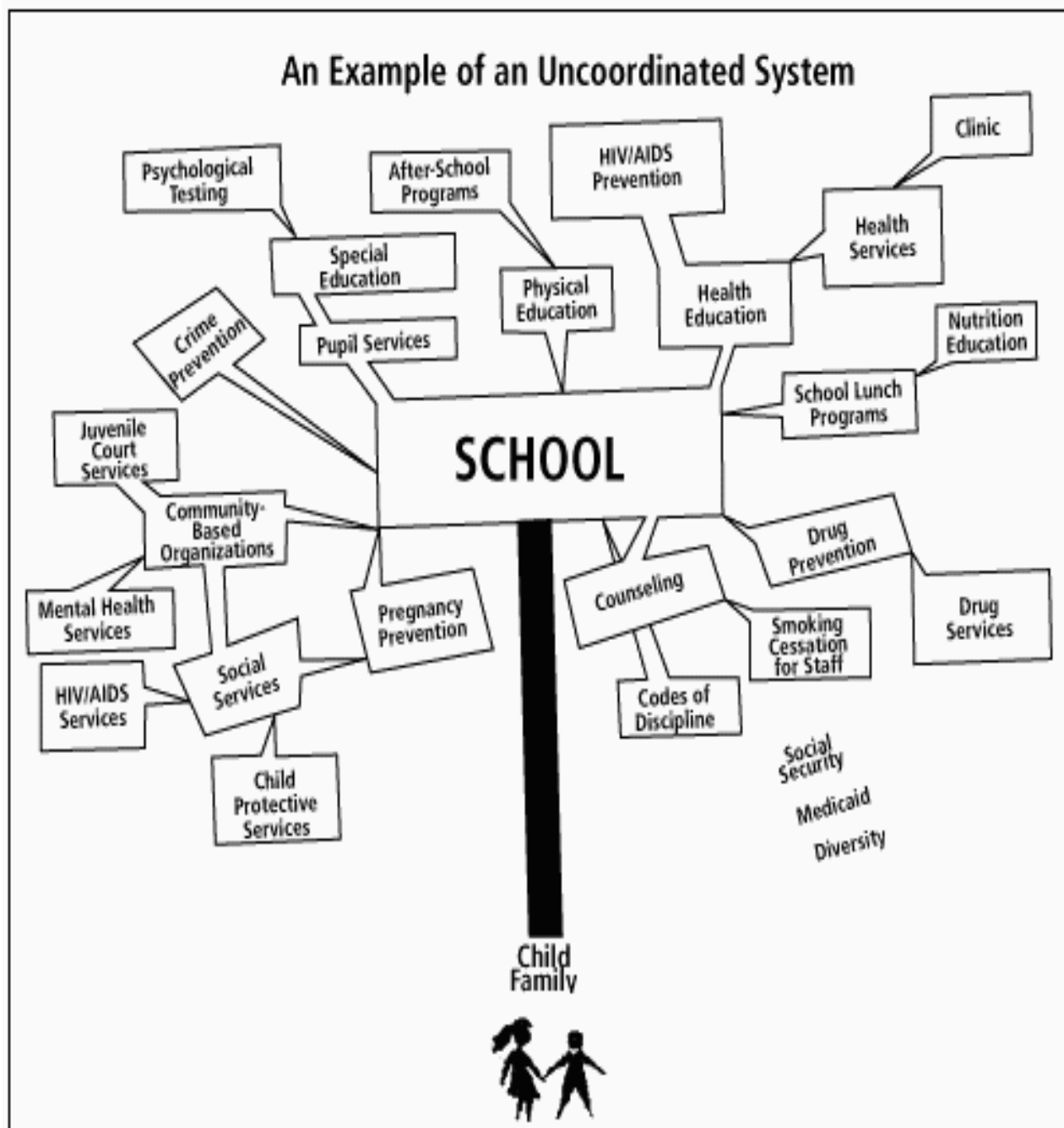
APPENDIX M



Perceived School Psychological Environment

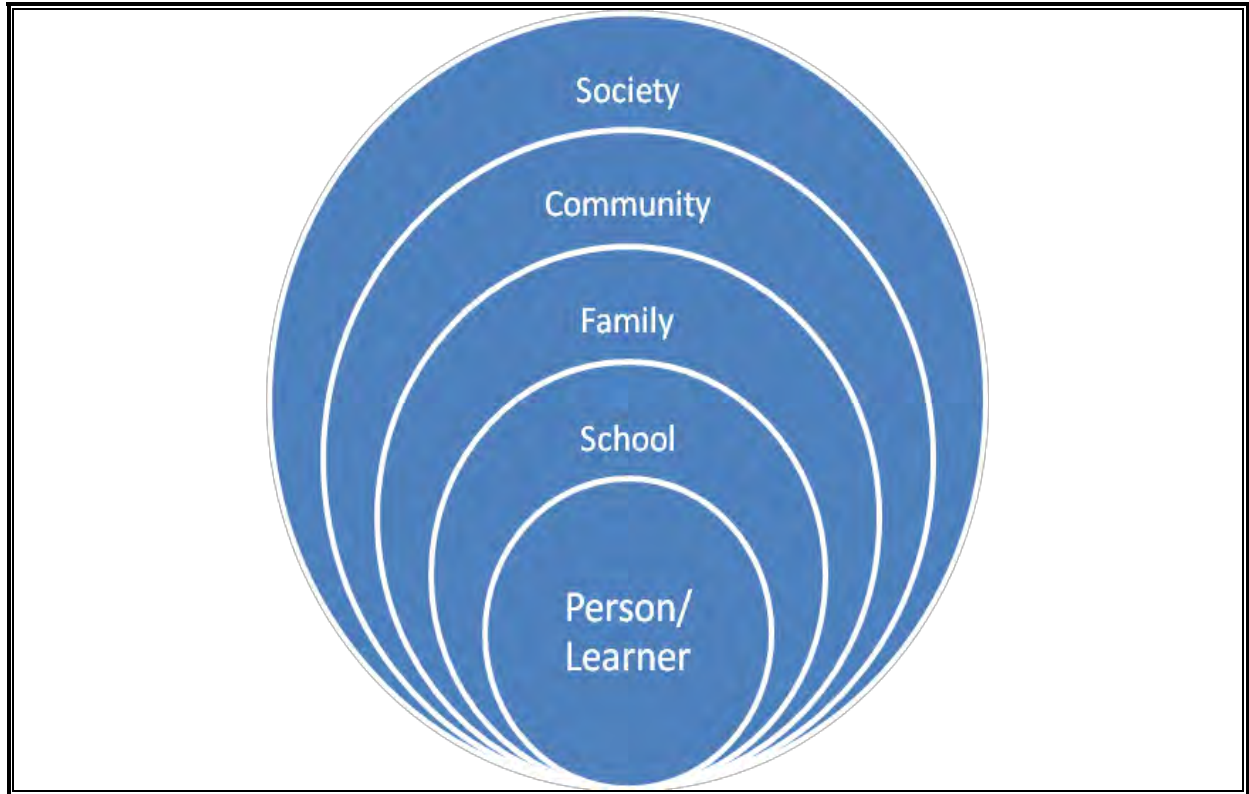
(Adapted from Roeser, R.W., Eccles, J. & Sameroff, A.J., 1998, p. 325)

APPENDIX N



EDC in partnership with APA, ASCA, NASN, NASP, and NASW

APPENDIX O



The social interdependence of mental health

(Adapted from Swartz, De la Rey, Duncan & Townsend, 2011, p. 502)

APPENDIX P

STRUCTURE OF EDUCATION SUPPORT SERVICES (ESS)

NATIONAL LEVEL	HDE ♦ Coordinating Structure	Forums	<ul style="list-style-type: none"> • Ensure accommodation of diversity; • Removal of barriers in education and training
PROVINCIAL LEVEL	MEC of Education ♦ Coordinating Structure	Forums DPOs & NGOs	<ul style="list-style-type: none"> • Capacity building for District offices
DISTRICT LEVEL	Several district offices per province • Support Personnel		<ul style="list-style-type: none"> • Support CLBTs • Develop preventative or developmental programmes • Individual assessment of learners (only when asked by CLBT)
CENTRE OF LEARNING	➤ CLBT		<ul style="list-style-type: none"> • Identify, assess and support learners (LBED)
<p>♦ = each of the five sections of the Department of Education (Development, curriculum, finance, transport, building & early childhood) are represented;</p> <p>• = psychologists, doctors, nurses, social workers, school counsellors etc.;</p> <p>➤ = mainly educators, although support personnel, educators from specialised learning centres, health and welfare experts, NGOs, DPOs, parents, etc., can be represented</p>			

Figure: The structure and functioning of ESS in South Africa (Adapted from Mashile, 2000, p. 92)

APPENDIX Q
School Health Promotion
The Eight Groups of the Health Promotion
Project

Functional Group	Goals	Projects
Road safety, first aid and personal hygiene	To train teachers to train students, who would train other students. To ensure a better community.	Seminars for teachers on road safety and first aid. Teachers to attend to the personal hygiene of students on a daily basis.
Teenage club	To prepare students for the adult world. To ensure that students enter the adult world with self-confidence and responsibility.	Invited speakers to address topics such as child abuse, teenage pregnancies, personal safety, and various career choices. AIDS and TB drama for students in Grades 6 and 7.
Drug abuse	To make students aware of the dangers of drugs. To help students handle peer pressure. To make students aware of their rights as children.	Teachers attended courses where they were taught to identify various problems. There were presentations by the Child Protection Unit and South African Police Services and videos dealing with peer pressure and drugs.
After-care programme	To develop an after-care programme that is interesting, fun, recreational, stimulates cultural interest, contributes to the well-being of the community, and stimulates interest on the part of the students in community events.	(This programme did not take place because of an overload of programmes occurring after school, minimal parent and community interest, a shortage of accommodation, and a lack of funds.)
Remedial group	To assist students with learning difficulties in Afrikaans, English and Mathematics.	Provision of assistance by senior students to junior students, all junior primary teachers, and some senior primary teachers.
Youth preparedness	To create outdoor educational situations such as camps and tours.	There were speakers from 'The Fairest Cape,' excursions to Koeberg and Rondevlei Nature Reserves, a camp at Cape Point and the formation of a nature club.
Nutrition project	To be self-sustainable. To improve upon the existing feeding project. To encourage initiative. To facilitate better relationships between students. To improve communication between staff, students and parents.	Diet and lifestyle classes for students, teachers and parents. Initiation and maintenance of a vegetable garden to supplement the nutrition scheme. Growth monitoring of Grade 1 students. Dietary supplementation for athletes.
Teacher support group	To acquire healthy eating habits. To start an exercise programme. To monitor weight and blood pressure. To improve self-image. To deal more appropriately with conflict and depression.	A 'Walk it off' programme. Aerobics classes. Training in weight and blood pressure measurement. Training in behavior modification. Workshop on counseling skills.

(Extracted from B. Johnson & S. Lazarus, 2003, p. 89)

APPENDIX R

LANGUAGE CLEARANCE CERTIFICATE

25 Maple Crescent
Circle Park
KLOOF
3610

Phone 031 – 7075912
0623757722
Fax 031 - 7110458
E-mail:
www@nasec@edukasa.net
sathsgovender4@gmail.com

Dr Saths Govender

1 OCTOBER 2014

LANGUAGE CLEARANCE CERTIFICATE

TO WHOM IT MAY CONCERN

This serves to inform that I have read the final version of the thesis titled:

THE STATE OF SCHOOL PSYCHOLOGICAL SERVICES IN SECONDARY
SCHOOLS: EXPERIENCES OF PRINCIPALS, SCHOOL COUNSELLORS,
EDUCATORS AND LEARNERS, by H. N. Muribwathoho.

To the best of my knowledge, all the proposed amendments have been effected and the work is free of spelling and grammatical errors. I am of the view that the quality of language used meets generally accepted academic standards.

Yours faithfully



DR S. GOVENDER
B Paed. (Arts), B.A. (Hons), B Ed,
Cambridge Certificate for English Medium Teachers
MPA, D Admin.

APPENDIX S

TURNITIN REPORT

Psychological Services in Secondary Schools

ORIGINALITY REPORT

18%

SIMILARITY INDEX

12%

INTERNET SOURCES

10%

PUBLICATIONS

8%

STUDENT PAPERS

PRIMARY SOURCES

1	uir.unisa.ac.za Internet Source	<1 %
2	Rachel C. F. Sun. "Building social support for adolescents with suicidal ideation: implications for school guidance and counselling", British Journal of Guidance & Counselling, 8/2007 Publication	<1 %
3	Submitted to University of Stellenbosch, South Africa Student Paper	<1 %
4	Bridget Johnson. "Building Health Promoting and Inclusive Schools in South Africa", Journal of Prevention & Intervention in the Community, 01/01/2003 Publication	<1 %
5	Moshe Tatar. "Counsellors' perceptions of adolescence", British Journal of Guidance and Counselling, 05/2001 Publication	<1 %
6	Gutkin, T.B.. "Reconceptualizing school psychology from a service delivery perspective: Implications for practice, training, and research", Journal of School Psychology, 199023 Publication	<1 %
7	etd.uwc.ac.za Internet Source	<1 %

Submitted to University of KwaZulu-Natal